

2016 MAPT Directory Advertising Order Form

Directory Advertising Rates

Black and White Ads

Mini Ad (3-3/4" W x 2" L)	\$125
Quarter Page (3-5/8" W x 4-7/8" L)	\$175
Half Page (7-1/2" W x 4-7/8" L)	\$325
Full Page (7-1/2" W x 10" L)	\$490

The following ad spaces are full page and accommodate one advertiser each. **Please call the MAPT office to be placed in the rotation to receive one of these ads.**

Inside Front Cover~ Full Color	\$1250
Adjacent to Inside Front Cover~ B&W	\$1000
Inside Back Cover~ Full Color	\$1250
Centerfold (2 full pages)~ B&W	\$1000
Back Cover~ Full Color	\$1750

Advertising Terms

Advertising copy is due by **October 19, 2015**

A printout of your ad and an electronic file must be accompanied with this form.

Advertising Specifications

Media Accepted:

Cd-Rom and USB flash drive. Files may also be e-mailed with 2016 directory ad and your company name in the subject line to sknechtges@mapt.org. Please confirm with Susan (517) 886-0881 that your e-mail was received by MAPT.

Preferred File Formats:

High-resolution PDF files w/fonts embedded and raster images @ 300dpi.
 Adobe Illustrator eps w/fonts converted to outlines and raster images @ 300dpi
 Adobe PhotoShop tiff or eps @ 300dpi
 QuarkXpress
 InDesign

The following files are also accepted but may incur an additional cost (Please supply all links and fonts)

Adobe PageMaker
 Macromedia Freehand (Mac only)
 Corel Draw (Windows only)

Company Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____ Fax: _____

Contact Person: _____ E-mail: _____

Please indicate your selection:

- Rerun last year's ad
- Business Card \$125
- Quarter Page \$175
- Half Page \$325
- Full Page \$490

Please call for availability of these ads:

- Inside Front Cover \$1250
- ~~Adjacent to Inside Front Cover \$1000~~
- Inside Back Cover \$1250
- Centerfold (2 full pages) \$1000
- Back Cover \$1750

Thank you for your continued support of MAPT!
 Please mail, fax, or email this form to:

MAPT
 Susan Knechtges
 6250 W. Michigan Avenue, Suite A
 Lansing, MI 48917
 Fax: (517) 886-0882
 E-mail: sknechtges@mapt.org
 Questions: (517) 886-0881

_____ Check is enclosed	_____ Please invoice
_____ Bill my credit card;	
Please charge my <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover	
Card # _____	
Expiration Date _____	Security Code _____ Amount _____
Name on Card _____	
CC Street Address _____	
City/State/Zip _____	