



BUSINESS ADVERTISING CONTRACT

BUSINESS NAME: _____

CONTACT PERSON: _____

BILLING ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE: _____

EMAIL: _____

CREDIT CARD PAYMENT:

EXPIRATION DATE

CARDHOLDER NAME

3-DIGIT AUTHENTICATION

(4% nonrefundable CC service charge)

Check #

4-DIGIT FOR AM-EXPRESS

(Make checks payable to Artist Connection Theatre)

TOTAL AD COST: _____

CIRCLE SELECTION BELOW:

***BACK COVER**
\$1,250.00

***INSIDE FRONT COVER**
\$1,000.00

FULL PAGE
\$500.00

HALF PAGE
\$350.00

QUARTER PAGE
\$250.00

(Those highlighted are not available)
*One Business per ad location

I do hereby agree to purchase advertising in the Artist Connection Theatre Playbills. I agree to pay the full balance by January 4, 2024 and understand that no refunds will be given once the form has been submitted. The ad is due January 5, 2024.

Please send the completed Jpeg/PNG ad to artistconnectiontheatre@gmail.com.

ADVERTISER'S SIGNATURE: _____ DATE: _____