Advertising Order Form

Name: _____

Company: _____

Address: _____

City, State Zip: _____ Country _____

Phone: _____ Fax: _____

Email: _____

Type of advertisement to be placed:

☐ NAEMSP® Web Page only - Set-up fee ($175 Classified/Job Ad – jobs page
☐ Maintenance fee - Indicate number of months the advertisement should run
$
____ 1-2 months - $60 per month $_____
____ 3-6 months - $50 per month
____ More than 6 months - $40 per month $_____
Logo - $50 (one-time fee)

☐ NAEMSP® *E-News* only - Set-up fee ($175 Classified/Job Ad
☐ Maintenance fee - Indicate number of months the advertisement should run
____ 1-2 months - $60 per month $_____
____ 3-6 months - $50 per month
____ More than 6 months - $40 per month $_____
Logo - $50 (one-time fee)

☐ NAEMSP® E-blast ($1,000)
(Graphic-heavy ads should be provided as a jpg; word-heavy ads should be provided in a Word-type format) $

☐ Bundle – NAEMSP® E-News (one month) and website (two months)
☐ Classified/Job Ads - - $350
$_____

TOTAL
$_____

Payment Type: ☐ Check ☐ Visa ☐ MasterCard ☐ American Express

Credit Card Number: _____ Exp. Date: _____

Name printed on card: _____ CVV: _____

Billing Address: _____

Signature: _____

Please send this form to: **EMAIL: info-NAEMSP@NAEMSP.org**