



ADVERTISING CONTRACT
& ORDER FORM

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- 1/8 page 1 issue (horizontal) \$75
- 1/8 page 6 issues (horizontal) \$300
- DSACK to design (add \$30)

Total due: _____

Company/Organization Name _____

Contact Person's Name _____

Address _____

City, State, Zip _____

Telephone _____

E-mail _____

Check enclosed for \$_____ (please make checks payable to DSACK.)

Signature: _____

Please return this form with payment to:

DSACK
ATTN: Lee Ann Mullis
P.O. Box 910516
Lexington, KY 40591-0516
PAYMENT

- Ads may be in TIF, JPG, or GIF format. Ads may be sent via email (email address will be provided)
- DSACK can furnish simple typography-only ad design and production for an additional \$30.

Down Syndrome Association of Central Kentucky P.O. Box 910516 Lexington, Kentucky 40591-0516
859. 494.7809 www.dsack.org