

## Advertising Contract

Company Name: _____	CCPA#: _____
Contact: _____	
Billing Address: _____	
City, Province, Postal code: _____	
Email: _____	Telephone: _____
Fax: _____	

*Please attach advertisements to this contract and indicate preferred timeframe (urgent, standard, etc.).*

**I would like** (check all that apply):

1. Emails

Electronic Bulletin (ListServ)

**\$110.00 per ad**

Preferred date: \_\_\_\_\_

Dedicated Isolated E-mail

**\$250.00 per ad**

Preferred date: \_\_\_\_\_

2. Direct Mail-Out

See <http://www.ccpa-accp.ca/resources/advertising/> for rates.

Preferred date: \_\_\_\_\_

Preferred date: \_\_\_\_\_

3. Cognica

See <http://www.ccpa-accp.ca/resources/advertising/> for rates.

Please select the size of the advertisement:

Full page

1/2 page

1/4 page

Business card size

Please select all issues in which you wish to include your advertisement:

Fall

Winter

Spring

Summer

Cancellations must be in writing. Additions and/or revisions are subject to extra charges. Payment in full is due with contract. Prices are net of agency commissions and are not subject to GST. Publication of any advertisement and insertion of materials is subject to the approval, by CCPA, of the advertisements and inserts.

**Method of payment:**  Cheque  Credit Card (MasterCard / Visa / American Express)

**Credit Card #** (VISA, MASTERCARD, AMERICAN EXPRESS) \_\_\_\_\_

**Expiry Date** (MM/YY) \_\_\_\_\_

**CVD** \_\_\_\_\_

**Card Holder's Name** \_\_\_\_\_

**\*Signature:** \_\_\_\_\_

**\*Date:** \_\_\_\_\_

Please email the completed form to [cecadmin@ccpa-accp.ca](mailto:cecadmin@ccpa-accp.ca) or fax to 613-237-9786.