



ADVERTISING CONTRACT

DATE: / /

ADVERTISER INFORMATION:

Representative _____

Company Name _____

Address _____

City, State, Zip _____

Phone Number _____

Email _____

Signature _____

Relationship: Parent _____ Grandparent _____ Friend _____ Relative _____ Other _____

AD SIZES AND PRICING

_____ 1/3 Page **\$80.00**
5 in. x 2 1/2 in.

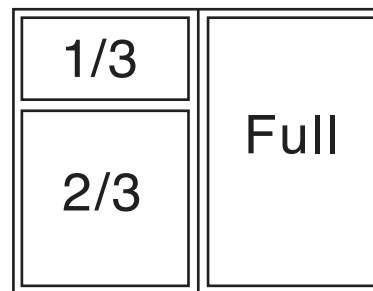
_____ Prime Location - **add \$300.00**
(Subject to availability)

_____ 2/3 Page **\$160.00**
5 in. x 5 1/4 in.

_____ Slideshow - **add \$50.00**
(displayed on screen at LOCS Gala)

_____ Full Page **\$200.00**
5 in. x 8 in.

***Ad files must be 300 dpi resolution
and in PDF or JPEG format.**



Email ad files or ad questions to galaads@liveoakclassical.com

PAYMENT & INSTRUCTIONS

_____ Payment attached Check no. _____

_____ Advertiser will email ad file _____ handwritten instructions attached

_____ Program designer will generate from: _____ scan the attached _____ file on disc

_____ Other _____

Auction Representative Signature

Date

Thank you for your generous support! www.liveoakclassical.com
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