



ADVERTISING CONTRACT & ORDER FORM

Please complete the following information:

Company Name:

Contact Name:

Mailing Address:

City:

State:

Zip:

Phone:

Email:

Available Contract Options

Please choose from the following options:

Home Page - Premium Ad

	Contract	Price	Specs
<input type="checkbox"/>	6 months	\$750	150 x 75 pixels - up to 10k
<input type="checkbox"/>	12 months	\$1500	150 x 75 pixels - up to 10k

Home Page - Standard Ad

	Contract	Price	Specs
<input type="checkbox"/>	6 months	\$500	150 x 40 pixels - up to 6k
<input type="checkbox"/>	12 months	\$1000	150 x 40 pixels - up to 10k

Please complete the following information or send a check payable to the Flagstaff Chamber of Commerce

Card Type:

Charge Card #:

Expiration Date:

I hereby authorize the recipient of this form to use my credit card to debit my account for the amount stated above and understand that this fee is non-refundable.

Authorized Signature: _____

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