

TEXAS ALMANAC

2016-2017

Print Advertising Contract

Advertiser: _____

Contact Name: _____

Address: _____

City • State • Zip: _____

Phone: _____ Fax: _____

Email: _____

Advertiser hereby commits to the following ad size(s) and rate(s):

Full Page: _____ 1/2 Page: _____ 1/4 Page: _____

Ad Rate(s): _____

Placement Preference (subject to availability): _____

Deposit or Full Payment: _____ Date for Final Payment: _____

Payment: Check ___ VISA ___ MasterCard ___ Discover ___ Amex ___ Invoice ___

Agreed to By: _____

Title: _____ Date: _____

For more information, please contact Terri Killen, advertising sales director:
512-300-0772 or TerriKillen@TSHAonline.org.



PUBLISHED BY
TEXAS STATE HISTORICAL ASSOCIATION

TEXAS ALMANAC

2016-2017

Website Advertising Contract

Advertiser: _____

Contact Name: _____

Address: _____

City • State • Zip: _____

Phone: _____ Fax: _____

Email: _____

Advertiser hereby commits to the following ad size(s), rate(s), frequency:

Panel _____ Banner: _____ Skyscraper: _____

Ad Rate(s): _____

Months Ad to Appear: _____

Deposit or Full Payment: _____ Date for Final Payment: _____

Payment: Check ___ VISA ___ MasterCard ___ Discover ___ Amex ___ Invoice ___

Agreed to By: _____

Title: _____ Date: _____

For more information, please contact Terri Killen, advertising sales director:
512-300-0772 or TerriKillen@TSHAonline.org.



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