



Evening of Hope
benefiting St. Jude Children's Research Hospital
Saturday, April 28, 2012 – Westin Oaks Houston

Program Book Advertising Order Form

Please print

Company/Family Name: _____ Date: _____

Contact Name: _____ Title: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Advertising Opportunities (Please check one) _____ \$125 Quarter Page Color Ad

_____ \$275 Half Page Color Ad

_____ \$500 Full Page Color Ad

_____ \$750 Full Center Page Color Ad

_____ \$750 Inside Back Cover Ad

_____ \$1,000 Back Cover Ad

Instructions: Please call our attention to unusual spellings. Make Capitals and Spacing distinct.

Camera Ready Copy – all copy, logos and artwork must be received by March 23, 2012. Artwork must be supplied by client.

Resolution: 300 dpi

File Format: PDF

Size: Full page - 6"W X 7.5"H, Half page - 6"W X 3.5"H, Quarter page - 2.75"W X 3.5"H

Color profile: CMYK

No bleeds, crop marks, registration marks or page information

Copy to be set for ad – Please print clearly here. _____

Full payment must be included with form.

Please make checks payable to: St. Jude Children's Research Hospital

Send payment and form to:

Angela Alvarado

ALSAC / St. Jude

1535 West Loop South, Suite 240

Houston, Texas 77027

t (713) 599.1441 f (713) 599.1438

For Committee Use Only

Artwork/Copy received

Acknowledgement sent

Company/Family will send

THANK YOU!

Evening of Hope

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www.stjude.org/houston

White copy: St. Jude Yellow copy: Donor