

ABN: 667 650 662 57 54 Hills Street, North Gosford 2250

Date \_\_\_\_\_

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**Phone** 4325 3393

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ ABN: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

### ADVERTISING DETAILS

#### Issue

Sept/Oct     Nov/Dec     Jan/Feb     Mar/Apr     May/Jun     Jul/Aug

3 issue discount    Editorial to appear in: \_\_\_\_\_

#### Advert Size

1/18 page     1/6 page     1/3 page     1/2 page     Full page

**Advertisement Price:** \_\_\_\_\_

#### Artwork Supplied

Yes     Seniors on the Coast to create new artwork

#### Payment

Cheque     Electronic Transfer     Credit Card

**Credit Card Details**    Card type \_\_\_\_\_ Card No. \_\_\_\_\_

Name on Card: \_\_\_\_\_ Expiry: \_\_\_\_\_

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

**IMPORTANT:** By signing this form below, the client agrees to proceed with advertising as per details above in Seniors on the Coast. I/We agree to the priced quoted above. We acknowledge & confirm that we will make payment by the date specified on the invoice.

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