



SKATING

magazine advertising contract

advertiser information

Advertiser or Company Name _____ Employee Identification Number (EIN) _____

Street Address _____ City _____ State _____ Zip _____

Contact Name _____

Telephone _____ Fax _____ Contact E-mail (Required) _____

Agency Name (if different from above) _____ Employee Identification Number (EIN) _____

Street Address _____

Street Address _____ City _____ State _____ Zip _____

Contact Name _____

Telephone _____ Fax _____ Contact E-mail (Required) _____

SKATING magazine

Ad Size	Color or B/W	Issue(s)
<input type="checkbox"/> Full Page	<input type="checkbox"/> Color <input type="checkbox"/> B/W	<input type="checkbox"/> January <input type="checkbox"/> June/July
<input type="checkbox"/> Half Page	<input type="checkbox"/> Color <input type="checkbox"/> B/W	<input type="checkbox"/> February <input type="checkbox"/> Aug./Sept.
<input type="checkbox"/> Third Page	<input type="checkbox"/> Color <input type="checkbox"/> B/W	<input type="checkbox"/> March <input type="checkbox"/> October
<input type="checkbox"/> Quarter Page	<input type="checkbox"/> Color <input type="checkbox"/> B/W	<input type="checkbox"/> April <input type="checkbox"/> November
<input type="checkbox"/> Sixth Page	<input type="checkbox"/> Color <input type="checkbox"/> B/W	<input type="checkbox"/> May <input type="checkbox"/> December
<input type="checkbox"/> Classified	<input type="checkbox"/> Magazine Only	Web & magazine (if applicable)
<input type="checkbox"/> Materials Enclosed <input type="checkbox"/> Materials to come		

Specify any special positioning (special rates apply, call for availability)

Inside Front Cover Inside Back Cover Specific Page (if available)

Right-facing Page Other _____

notes

basic skills edition

Ad Size	Special Ad Placement	Issue(s)
<input type="checkbox"/> Full Page	<input type="checkbox"/> Inside Front Cover (if available)	<input type="checkbox"/> 2011-12
<input type="checkbox"/> Half Page	<input type="checkbox"/> Inside Back Cover (if available)	<input type="checkbox"/> 2012-13
<input type="checkbox"/> Quarter Page		

Total Amount due \$ _____

payment information

☐ Payment enclosed

☐ VISA ☐ MasterCard ☐ American Express

Card Number _____

Expiration Date _____

Card Verification Value Code _____

Name on Card _____

Billing Address _____

City/State/Zip _____

Please sign below to verify that you have read and agree to the terms and conditions for advertising in SKATING magazine. Unsigned contracts will not be accepted.

Signature _____

Date _____

All first-time display advertisers must pay in full (for the first 10 reservations). Classified advertisers must pay in full when submitting each monthly reservation order. Established advertisers' payments are due and payable within 30 days from invoice date. A 15% agency discount applies ONLY if invoice is paid within 30 days.

**Late and/or improperly formatted ads will be assessed a 10% penalty or ad will be pulled without refund.*