



2017-18 OCAHU Newsletter Advertisement Information and Agreement

Valid September 1, 2017 through July 31, 2018

This Agreement is entered on _____, by and between the Orange County Association of Health Underwriters (OCAHU) and Sponsor (Company Name):

Contact: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Yes, I would like to place an ad in the _____ 2017-18 Newsletter(s).

(September 2017, November 2017, January 2018, March 2018, May 2018 and July 2018)

Location Choice: _____

Signature of Contact: _____

Advertising Opportunities Per Issue (Issues September, November, January, March, May, July)

Inside Front Cover - \$600 / Inside Back Cover - \$550

Full Page - \$425 / Half Page - \$275 / Quarter Page - \$150

Discounts Available for Multiple Issues: 20% for 6 issues, 10% for 3 issues or more.

Advertisement Specs: All Ads must be in a Hi-Quality JPEG Color File

Inside Front and Back Covers or Full-Page Ad: 10.5-in tall x 8-in wide

Half Page: 5.25-in tall x 8-in wide / Quarter Page: 5.25-in tall x 3.75-in wide

Issue Advertisement Deadlines:

August 1, October 1, December 1, February 1, April 1 and June 1

Please forward a check made payable to OCAHU and send to the address listed below. Or, if you prefer to pay with a credit card, please complete the following and fax back to 858-408-2671 or email orangecountyahu@yahoo.com

American Express Discover Visa MasterCard

Security Code: _____ Exp. Date: _____

Name on Card: _____ Card Number: _____

Signature of Cardholder: _____

1442 E. Lincoln Avenue, PMB 441 • Orange, CA 92865-1934

Tel: 866.921.6440 • Fax: 858.408.2671 • orangecountyahu@yahoo.com • ocahu.org