

# 2018 IFDA Resource Directory Contract

Company Name \_\_\_\_\_

Contact (please type/print) \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Fax \_\_\_\_\_

Check the appropriate box:	IFDA Member Early Bird Rate (by July 16)	IFDA Member Regular Rate (July 17 - August 10)	Non-Member Early Bird Rate (by July 16)	Non-Member Regular Rate (July 17 - August 10)
<input type="checkbox"/> Inside front cover - full page Dimensions: 7 1/2" W x 10" H (1 available)	\$400	\$500	\$500	\$625
<input type="checkbox"/> Outside backcover - full page Dimensions: 7 1/2" W x 10" H (1 available)	\$400	\$500	\$500	\$625
<input type="checkbox"/> Inside back cover - full page Dimensions: 7 1/2" W x 10" H (1 available)	\$400	\$500	\$500	\$625
<input type="checkbox"/> Tabbed Inside Pages Dimensions: 7 1/2" W x 10" H	\$300	\$400	\$375	\$500
<input type="checkbox"/> Regular ad - full page Dimensions: 7 1/2" W x 10" H	\$250	\$350	\$310	\$440
<input type="checkbox"/> Regular ad - half page Dimensions: 7 1/2" W x 4 7/8" H	\$200	\$275	\$250	\$350
<input type="checkbox"/> Regular ad - quarter page Dimensions: 7 1/2" W x 2 3/8" H	\$150	\$200	\$210	\$250

**Total amount enclosed: \$** \_\_\_\_\_ **Please note: In order to advertise at the Early Bird Rate, this contract and payment must be RECEIVED at the IFDA Office by July 16, 2018.**

**Prices above are for black and white ads. For color rates, please contact Anna Nielsen at 800.982.6561 or [anielsen@ifda.org](mailto:anielsen@ifda.org).**

## General Policies

*Payments MUST accompany your firm's print-ready advertisement. Submitted ads which are not properly sized will be altered to fit at the discretion of the editor. IFDA reserves the right to reject inappropriate copy. Advertisements will be accepted until the August 10, 2018 deadline.*

*IFDA is hereby authorized to insert our advertisement in the 2018-2019 IFDA Resource Directory. I understand and agree to the provisions specified in the General Policies section and have enclosed a camera-ready advertisement and payment for the correct amount made payable to IFDA.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Credit Card Payment

If you wish you pay IFDA via credit card, please complete the following information:

\$ \_\_\_\_\_  
Amount

\_\_\_\_\_  
Cardholder Name

\_\_\_\_\_  
Card #

\_\_\_\_\_/\_\_\_\_\_  
Expiration Date      Security Code

- Visa  
 MasterCard  
 American Express

*Once your credit card has been charged, this information will be destroyed. IFDA does NOT keep credit card information on file. If you have questions, contact IFDA at 800.982.6561.*

\_\_\_\_\_  
Authorization Signature