

Retail Nurseries & Garden Centers Guide

2020 ADVERTISING INSERTION ORDER

ADVERTISER _____ CONTACT _____
 AGENCY (IF APPLICABLE) _____ CONTACT _____
 BILLING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE () _____ FAX () _____ E-MAIL _____
 AUTHORIZED SIGNATURE _____ DATE _____

DUE DATE
 Ad reservations and
 ad materials are due
 December 17, 2019

SELECT YOUR AD (Please check size and circle amount)

	MEASUREMENTS		AD RATES	
	WIDTH	HEIGHT	OAN MEMBER	NON-MEMBER
<input type="checkbox"/> Business card	3.5"	2.25"	\$410	\$620
<input type="checkbox"/> Business card *premium location	3.5"	2.25"	460	487
<input type="checkbox"/> Double business card	3.5"	4.5"	615	930
<input type="checkbox"/> Double business card *premium location	3.5"	4.5"	665	997
<input type="checkbox"/> Full panel ad	3.5"	7"	920	1,399
<input type="checkbox"/> Full panel ad *premium location	3.5"	7"	1,175	1,775
<input type="checkbox"/> Horizontal premium ad	7.25"	4.5"	1,225	members only
<input type="checkbox"/> Back panel ad	3.5"	7"	1,785	members only

TERMS *All rates net. No spaces confirmed until ad is paid.*

PLACEMENT REQUEST — Every effort will be made to position the ad as requested; however, we cannot guarantee placement unless a premium position has been paid for.

Preferred placement: _____

Other comments: _____

PAYMENT

Amount paid: \$ _____ Check Enclosed Bill My Credit/Debit Card
 Visa/MC/Debit # _____ Exp. Date _____
Please note: Visa/MasterCard and debit cards only. We cannot accept American Express.
 Security Code _____
 Cardholder Name _____

AD MATERIALS

Ads should be submitted in CMYK color at high resolution (300 dots per inch) in a PDF, EPS, or Photoshop TIF file. All fonts should be embedded. If it will be necessary for OAN to alter or change the ad, please submit the original native file in Adobe InDesign or Adobe Illustrator (any version).

Please check the box below that best reflects the ad to be placed.

- RUN AS SUBMITTED
- REPEAT LAST YEAR'S AD
- ALTER SUBMITTED AD
Include copy changes
- COMPOSE NEW AD
Provide or describe desired copy and images.

SUBMIT ADS

Email ads to ads@oan.org

Email or fax completed form to
ads@oan.org or
503-682-5727

Authorized Signature: _____ Date: _____



OREGON
 ASSOCIATION OF
 NURSERIES™

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