

**South Carolina Chiropractic Association  
Online Advertising Form  
(Please Print or Type all information)**

Return form with payment to SCCA, PO Box 1763, Columbia, SC 29202 or Fax to (803) 252-0589 with VISA, MasterCard, or American Express.

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

SCCA Member?     Yes     No

Ad Type:     New Ad     Change Ad     Cancel Ad     Extend Ad

Category:  Items for Sale     Practice for Sale     Items Wanted

Employment Opportunities     Relief/Vacation Work

Ad to read (Use extra paper if needed) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of Words: \_\_\_\_\_

(Abbreviations, acronyms, and phone numbers count as one word. Hyphenated words count as two words. The Editor reserves the right to abbreviate if necessary.)

### **Ads run monthly**

Member Rates: Job Placement listings are free. Classified advertising is free up to 50 words. Each word exceeding 25 words is \$.50 each. Ads for Palmetto Members are complimentary.  
Non-Member Rates: Classified advertising is \$25.00 up to 25 words and \$1.00 per each additional word exceeding 25 words. Pre-payment is required.

Amount per issue \$ \_\_\_\_\_                      Number of Issues/Months: \_\_\_\_\_

Total \$ \_\_\_\_\_

Payment:     Invoice Me - (Members only)     Check Enclosed # \_\_\_\_\_

Credit Card Type:     VISA     MasterCard     American Express     Discover

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

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

Effective 12/16/2019 a \$10 convenience fee will be added to all transactions that are paid with a credit card. The convenience fee can be avoided by paying with a check or in person with cash.