



## Contract for Advertisement in 2020 Insider's Guide

Name of Business/ Organization \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 Telephone \_\_\_\_\_ Email \_\_\_\_\_

	<b>2019 Member Advertiser Ten-Year Member &amp; Member Non-Profits</b>	<b>(circle all options that apply)</b>	
		<b><u>Member</u></b>	<b><u>Non-Member</u></b>
Front Cover (Includes Feature Story!)*	\$1,500	\$1,600	\$1,800
Outside Back Cover*	\$1,400	\$1,500	\$1,700
Inside Cover (Front or Back)*	\$1,000	\$1,100	\$1,300
Inside Opposite (Front)*	\$1,000	\$1,100	\$1,300
Inside Opposite (Back)*	\$850	\$900	\$1,150
Opposite Masthead*	\$850	\$900	\$1,150
Full page*	\$650	\$700	\$850
½ page**	\$375	\$400	\$500
Banner (Center Spread-Map)	\$375	\$400	\$500
¼ page	\$280	\$300	\$400
Graphic Design (any size ad)		- Contact the Chamber -	
Coupon Page	\$50	\$100	\$150
Enhanced Listing (brief descript., map dot w/# in listing)	\$40	\$50	N/A
Directory List Basic (name, add, phone, website)	<i>FREE</i>	<i>FREE</i>	N/A
Custom Packages Available		- Contact the Chamber -	

\*Full page advertisers receive location dot on center page map and option to include coupon for \$25 in coupon page.  
 \*\*Half page advertisers have option to include coupon for \$50 in coupon page.

**Finished ads must be submitted by March 1, 2020.**

Ads must be camera ready (unless ordering graphic design) and provided in high resolution 300DPI .pdf or .jpg;  
 front cover photo should be 1200DPI. Format matching sizes specified:  
 Full Page: 7.5" W x 9.75" H or full bleed 8.75" W x 11.25" H with 7.5" x 9.75" safe area  
 ½ Page: 7.5" W x 4.6875" H \* ¼ Page: 3.5625" W x 4.6875" H \* Coupon 2.5"W x 2.5"H

**Method of Payment (Payment must be received by February 15, 2020)**

**Credit Card #:** \_\_\_\_\_  
                   **Visa** \_\_\_           **Master Card** \_\_\_           **American Express** \_\_\_           **Discover** \_\_\_  
**3 or 4 digit V-Code from the back of card:** \_\_\_\_\_ **Credit Card Expiration:** \_\_\_\_\_  
**Print Name as it appears on card:** \_\_\_\_\_  
**Card Holder Signature:** \_\_\_\_\_  
**Billing Address:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_                                   **Or Enclosed Check for \$** \_\_\_\_\_

Send check payments and this form to GFCC, P.O. Box 335, Freeport, ME 04032.  
 For more information, please contact [executivedirector@freeportmainechamber.com](mailto:executivedirector@freeportmainechamber.com)