

Advertising Order Form

A I want to advertise in the on-site Program & Exhibit Guide*

	exhibitor	non-exhibitor	Mechanical Requirements	
<input type="checkbox"/> 1/4 page	\$400	\$1,000	1/4 page	2 7/8" x 4 1/2"
<input type="checkbox"/> 1/2 page	\$600	\$1,200	1/2 page (horizontal)	6" x 4 1/2"
<input type="checkbox"/> Full page	\$1,000	\$2,000	Full page	6 1/8" x 9 3/8"
<input type="checkbox"/> Inside Front Cover	\$2,000	\$3,000	Full bleed (trim size)	6 5/8" x 10"
<input type="checkbox"/> Inside Back Cover	\$2,000	\$3,000		
<input type="checkbox"/> Back Cover (full color)	\$2,500	\$3,500		

Color: The outside back cover ad can be full color. All other ads must be black and white.

Artwork: High-resolution PDF file (300 dpi)
Please email PDF to: exhibitors@sdms.org by **AUGUST 2, 2010.**

B I want to advertise in the Conference Daily newspaper*

<input type="checkbox"/> 1/4 page	\$150 (per day)
<input type="checkbox"/> 1/2 page	\$300 (per day)
<input type="checkbox"/> Full page	\$500 (per day)

Mechanical Requirements

1/4 page	3 1/2" x 4 7/8"
1/2 page (horizontal)	7" x 4 7/8"
Full page	7" x 10"

Color: Ads must be black and white only.

Artwork: High-resolution PDF file (300 dpi)
Please email PDF to: exhibitors@sdms.org by **AUGUST 2, 2010.**

(Check **all** days on which you would like your ad to run)

- Thursday Issue Saturday Issue
 Friday Issue Sunday Issue

C Tote Bag Insert or Promotional Item*

- I would like to supply a tote bag insert. **Exhibitors: \$1500 Non-Exhibitors \$2000**
I understand that I am responsible for supplying and shipping the inserts or promotional items to the Conference site. Detailed instructions will be provided. Promotional items such as hand sanitizer, stress balls, or ultrasound gel are encouraged.

Requirements

All tote bag inserts are subject to SDMS approval. You are required to submit a PDF or a hard copy of your insert to: exhibitors@sdms.org by **AUGUST 2, 2010.**

D Room Drop*

- I would like to supply a room drop. **Exhibitors: \$2000 Non-Exhibitors \$3000**
I understand that I am responsible for supplying and shipping the inserts to the Conference site. Detailed instructions will be provided. Surcharge will be collected by hotel.

Requirements

All room drops are subject to SDMS approval. You are required to submit a PDF or a hard copy of your insert to: exhibitors@sdms.org by **AUGUST 2, 2010.**

* **Subject to SDMS approval**

Payment Information

Company Name _____
First Name _____ Last Name _____
Mailing Address _____
City _____ State/Province _____ ZIP+4/Postal Code _____
Daytime Phone _____ Email Address _____

Payment

A Program & Exhibit Guide Advertising	\$ _____
B Annual Conference Daily Advertising	\$ _____
C Tote Bag Insert	\$ _____
D Room Drop	\$ _____
Total	\$ _____

Payment Method

- Check enclosed for \$ _____
(Payable to SDMS, drawn on US bank and payable in US funds)
 American Express Discover MasterCard Visa
Full payment must be received by **August 2, 2010.**
Ads must be received by **August 2, 2010.**

Credit Card # _____ Expiration Date _____

Name on Card _____ Cardholder's Signature _____

Billing address for Credit Card Holder _____

City _____ State/Province/Country _____ ZIP+4/Postal Code _____

Agreement

A signature on this application indicates understanding and agreement to comply with all policies, rules, regulations, conditions and the SDMS refund and cancellation policy in the SDMS Exhibitor Prospectus and any others issued by SDMS regarding its Annual Conference; acknowledgement of having read the rules and regulations and agreement that the 2010 SDMS Annual Conference rules and regulations are an integral and binding part of this contract. Submission of this application also indicates I understand that there are no refunds for support opportunities or SDMS-approved advertising opportunities.

Signature of Authorized Representative _____ Date _____ Name of Authorized Representative (Please print or type) _____

Office Use Only: Date Rec'd: _____ Ad Art Rec'd: _____ Ad Approved: _____ Pmt Rec'd: _____