

## **Program Book Advertisements**

Please complete this form and return to Mazzoni Center along with a check or credit card information. All advertisements will be available in 4-color. Please note that we must receive your ad by Friday, April 15, 2016 to ensure that it will be in our program book. Ads should be submitted in high resolution png, eps or pdf files. Please send your ad to: brogers@mazzonicenter.org.

C D     T .			
Confact Person and Tifle			
	State		
Phone	E-mail		
Signature			Date
I am selecting the followin	ng ad placement (check one):		
Full-page Ad (	5" x 8") \$425	_ Quarter page Ad (2 3	/8" x 3 7/8") \$150
Half-page Ad (	(5" x 3 7/8") \$275		
Hall page Au \	(3		
Enclosed is a check payable	to <i>Mazzoni Center</i> in the amou	unt of \$	
Please send your form and po	ayment to:		
Mazzoni Center			
Attn: Brooke Rogers	s, Special Events and Volunteer	Coordinator	
21 South 12th St., 1			
Philadelphia, PA 19	107		
I/We prefer to pay by credit	t card: 🗆 MasterCard 🗀 🗎	/isa □ AMEX □	Discover
		ation?	
Is this payment being made b	by an 🗆 individual or 🗀 corpore	ulloll.	
	by an □ individual or □ corpord		Exp. Date _

A copy of the official registration and financial information of Mazzoni Center may be obtained from the PA Department of State by calling toll free, 1-800-732-0999. Registration does not imply endorsement.

For additional information about *Elixir* contact Brooke Rogers: 215-563-0652 ext. 218 or brogers@mazzonicenter.org.

