



Maui Chamber of Commerce

CONNECTIONS NEWSLETTER

Advertising Agreement

Date: _____
 Advertiser: _____
 Contact: _____
 Phone: _____
 Fax: _____

Billing Address:

Scheduled Issues: *Winter Issue* *Spring Issue* *Summer Issue* *Fall Issue*

<u>Ad Size</u>	<u>Rates</u>
<input type="checkbox"/> Full Page Ad	\$1500.00
<input type="checkbox"/> 1/2 Page Ad	\$750.00
<input type="checkbox"/> 1/4 Page Ad	\$375.00
<input type="checkbox"/> 1/8 Page Ad	\$280.00
<input type="checkbox"/> Special Business Card Ad	\$175.00

Payment Method

Art work must be submitted with payment.

Check
 Master Card
 Visa
 American Express

Card Holder Name: _____

Card#: _____ Ex Date: _____

Special Instructions:

The Chamber reserves the right, in its discretion, to select the material which will be published in the *Connections* newsletter. Because material may be submitted about many subjects from a wide variety of sources, the Chamber cannot be responsible for the accuracy of materials submitted, which is the sole responsibility of the submitting writer. Material published does not necessarily reflect the opinion of the Chamber or any member. Those who submit material are responsible for its content and agree to indemnify and hold the Chamber, the layout artist, and the printer free from any loss, liability, or damage resulting from its publication. In order for advertisements to appear in the Newsletter, all payments must be submitted before the Newsletter is printed.

I, _____, agree to the terms and conditions as stated on the advertising agreement form, and authorize the above schedule and rate of advertising in the *Connections Newsletter*.

Advertiser Signature: _____ Date: _____

Questions? Please contact the Maui Chamber of Commerce: Phone 269-0141, Fax 871-0706
313 Ano Street Kahului, HI 96732
Website: <http://www.maui-chamber.com>