

FPMA FOOTPRINTS/FPMA WEBSITE WANT ADS ADVERTISING INSERTION ORDER

Please print or type

Company Name: _____

Contact Person: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

FPMA Footprints Magazine

Spring 2017 Issue
Published in April

Fall 2017 Issue
Published in October

FPMA Website Want Ads (Job Bank/Classifieds)

Deadline for ads: 1st of the month prior to publication.

<u>Insertion Sizes</u>	<u>Placement Rates</u>
Full Page (7.5" x 10")	\$300
Half Page (3.75" x 10")	\$225
Half Page (7.5" x 5")	\$145
Quarter Page (3.75" x 5")	\$110
Business Card (2" x 3.5")	\$75

FPMA Members: No charge.

Go to the FPMA website at www.fpma.com, log in, and post the ad yourself or send verbiage you want posted to breesee@fpma.com. Ad will be posted by the next business day, pending approval.

Non-Members: \$120/ad for three months. Submit text and payment information via email to breesee@fpma.com or via fax at (850) 681-0899.

All ads for *FPMA Footprints* must be in one of the following formats:

Press-Ready PDF file OR TIFF file

Ads can either be in black & white or color (no difference in price).

To ensure print quality, please provide a high resolution file; ad should be specific dimensions indicated above.

All ads are subject to approval by FPMA. Acceptance of advertising for publication in *FPMA Footprints* does not constitute approval or endorsement by either *FPMA Footprints* or the Florida Podiatric Medical Association.

**ADVERTISING INSERTION ORDERS CAN EITHER BE PREPAID OR
AN INVOICE CAN BE SENT TO YOU UPON PUBLICATION.**

Make checks payable to "Florida Podiatric Medical Association" or submit credit card information (Amex, Visa, or MasterCard ONLY). Send insertion order, electronic file, and payment to:

FPMA Footprints
410 North Gadsden Street
Tallahassee, Florida 32301

1-800-277-3338
(850) 681-0899 (FAX)

Files and Questions:
breesee@fpma.com

This form is available at fpma.com by clicking on the "Public Affairs/FPMA Footprints" link.

If you wish to take advantage of placement opportunities, please fill out this form, sign and date below, and mail, email, or fax your completed form to the FPMA office.

SIGNED: _____ DATE: _____

NAME: _____ TITLE: _____

THANK YOU FOR ADVERTISING WITH FPMA!