



The Source: Advertising Insertion Order Form

Organization Name _____
 Contact Person _____ Title _____
 Address _____
 City, State, Zip _____
 Phone _____ Fax _____ E-mail _____
 Signature _____ Date _____

AD SIZES/RATES

Ad space is sold on a first-come, first-served basis and is limited to a total of two ads per issue (one premium placement and one standard placement). You will be contacted if we are unable to place your ad in the month(s) you have selected.

INSERTION ORDER

Available months: April 2018 through March 2019

Ad Type/Rate	Number of Months	Subtotal	Months for Insertion
One Month — Premium (\$1,500 per month)			
One Month — Standard (\$1,350 per month)			
Two Months or more — Premium (\$1,200 per month)			
Two Months or more — Standard (\$1,080 per month)			

Total number of packs _____

TOTAL DUE \$ _____

PAYMENT

Check (payable to the American College Health Association)
 Credit Card ___ Visa ___ MasterCard ___ American Express ___ Discover
 Card Number _____ Card Security Code _____ Exp. Date _____ Billing Zip _____
 Cardholder Name _____
 Cardholder Signature _____

ARTWORK SPECIFICATIONS

Ads will be published as is from provided digital files. ACHA will not design or format ads nor be responsible for quality of original files. Digital artwork is accepted via e-mail in these formats: JPG or PNG files that have embedded fonts and are optimized for the web.

TERMS

ACHA reserves the right to refuse advertisements. Advertisers may not depict, reproduce, or distribute images of American College Health Association (ACHA) products or resources, including ACHA corporate or project names (including the acronym ACHA), logos, cover art, or other proprietary images or information belonging to ACHA in any form. Additionally, the contents of all material on the ACHA website (www.acha.org), including the design and organization, are copyrighted by ACHA unless otherwise indicated. Content may not be reproduced, disseminated, published, or transferred in any form or by any mean, except with the prior written permission of ACHA.

SEND INSERTION ORDER, ARTWORK, OR QUESTIONS TO...

Danielle Monroe, Editor
 tel: 443-270-4565
 fax: (410) 859-1510
 email: dmonroe@acha.org

Remittance address for payment (you may fax if paying by credit card or PO):
 ACHA Advertising
 P. O. Box 419224
 Boston, MA, 02241-9224

Please be sure to include this order form with your payment.