



# Program & "Big Screen" Ad Order Form

Men's JO National Championships - May 3 - 8, 2016

## "BIG SCREEN" Ads - \$25.00

Let your gymnast know you're excited about their accomplishment with a "Big Screen" ad. Your "Big Screen" ad will be a part of our scrolling advertising on the large movie screen above the main scoring table. All "Big Screen" ads will appear in full color unless you submit them in black and white. Please submit the "Big Screen" ad as a high resolution jpg file.

### Program Ads

Program Ad	Dimensions	Prices	Program Ad & Big Screen
Program Ad - 1/4 Page	3 5/8 x 4 7/8	\$75.00	\$90.00
Program Ad - 1/2 Page	7 1/2 x 4 7/8	\$150.00	\$165.00
Program Ad - Full Page	7 1/2 x 10	\$300.00	\$315.00
Full Page Color Ad	7 1/2 x 10	\$500.00	FREE



### Submit Art Work by

Wednesday, April 20, 2016  
 cscharns.branchgym@gmail.com

### Questions

Please contact Cindy at  
 cscharns.branchgym@gmail.com  
 or (269) 963-4770

#### Artwork

All art, images, and ads must be submitted digitally.  
 Program advertising will be printed in BLACK & WHITE.  
 "Big Screen" Ads will be shown in either  
 black and white or color.  
*Please be advised,  
 images that bleed to edge could be cut off.*

#### Payments

Fax to: (269) 963-3678 or  
 Mail to: Branch Gymnastics  
 393 N Helmer Rd, Battle Creek, MI 49037  
 \* Payment is due at time of order.  
 Cash, check, Visa/Mastercard & Discover.  
Make checks payable to Branch Gymnastics.

## All art, images, and ads must be submitted digitally.

Name: \_\_\_\_\_

Family Name: The \_\_\_\_\_ Family *Your name, family name or corporate sponsor will be listed in the program exactly as it appears here. Please print or type clearly.*

Club/Company Name: \_\_\_\_\_

Point of Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Image File Name: \_\_\_\_\_

Description of image: \_\_\_\_\_ Program/"Big Screen"/Both  
*(Please Circle)*

Ad Size: \_\_\_\_\_ Dimension: \_\_\_\_\_ Price: \_\_\_\_\_ Payment Type: Cash or Check # \_\_\_\_\_

Credit Card

Name on Credit Card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Card Type: Visa/Master & Discover Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_