

# PSYCHIATRIC SOCIETY OF VIRGINIA VIRGINIA NEWS



## MEMBERSHIP ADVERTISING RATES

### INSERTION ORDER

#### Requested Publication Issue(s):

Spring (April)    Summer (June)    Fall (September)    Winter (December)

The deadlines for advertising materials are the following: **Spring issue** - March 1; **Summer issue** - May 1; **Fall issue** - August 1; **Winter issue** - November 1. Due to space constraints, ads are accepted on a first-come, first-served basis. Please submit this completed and signed insertion order as soon as possible to assure your selected advertising space. All ads should be produced as RGB or Index color and provided as 72 dpi jpg, png or gif files to Ray Hall via email at ray@societyhq.com. Ad production services are available for an additional fee of \$125 per hour.

- PLEASE PRINT -

Advertiser \_\_\_\_\_ Today's Date \_\_\_\_\_  
 Billing Client \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Headline \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_  
 Requested URL link \_\_\_\_\_

**If you reserve ad space in all four issues of the *PSV Newsletter*, there is a 25% discount per issue.**

**Total Amount Due \$** \_\_\_\_\_ P.O. / Insertion Number (if applicable): \_\_\_\_\_

FULL SIZE	HALF SIZE	QUARTER SIZE
<input type="checkbox"/> 1x rate - \$350 <input type="checkbox"/> 3x rate - \$262 each	<input type="checkbox"/> 1x rate - \$180 <input type="checkbox"/> 3x rate - \$135 each	<input type="checkbox"/> 1x rate - \$90 <input type="checkbox"/> 3x rate - \$67 each
Size: 750 px x 400 px horizontal	Size: 400 px x 200 px horizontal	Size: 200 px x 200 px

At the time of publication, your invoice will be issued. Payment is due within 15 days of invoicing or you may prepay for your ad. You will receive a link to the newsletter along with your invoice or receipt.

Invoice me    Payment with Credit Card

Special Instructions: \_\_\_\_\_

**Method of Payment:**    Check    VISA    MasterCard    American

Express

Card No: \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Security Code\* \_\_\_\_\_

Signature \_\_\_\_\_ Printed Name on Card \_\_\_\_\_

\*CVV code is the three digit number on the back of VISA or MC or 4 digit number on the front of AMEX card above the account number.

For payment by check, please make payable to **PSVA** and mail to:

**Psychiatric Society of Virginia • 2209 Dickens Road • Richmond, VA 23230-2005**

Phone (804) 565-6313 • Scan signed and completed form to ray@societyhq.com • Email: ray@societyhq.com