



39th National Indian and Native American Employment / Public Law 102-477 Training
 April 8-13, 2018 - Paragon Casino Resort, Marksville, Louisiana







PROGRAM BOOKLET ADVERTISEMENT AGREEMENT

Contact Person:	Title/Position:		
Grantee Organization:			
Mailing Address:			Daytime Phone: ()
City:	State:	Postal Code:	Fax No.: ()
Email Address:		Website:	

ADVERTISEMENT SPECIFICATIONS

- Advertisement copy should be in electronic format. All text must be converted to curves.
- File resolution should be no less than 300 dpi.
- Camera-ready art is also accepted.
- Proof (hard copy) should be mailed with your form and payment for accuracy.
- Advertisement electronic file or camera ready art, form and payment must be submitted by March 8, 2018.

<input type="checkbox"/> FULL PAGE \$400.00 	<input type="checkbox"/> HALF PAGE \$250.00 	<input type="checkbox"/> QUARTER PAGE \$175.00 	<input type="checkbox"/> EIGHTH PAGE \$90.00 	<input type="checkbox"/> OUTSIDE BACK COVER (7.5 X 10) - \$1,000.00	<input type="checkbox"/> INSIDE BACK COVER (7.5 X 10) - \$750.00
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I understand and agree with the requirements of this Agreement and am enclosing a payment of \$_____ (fee) for a _____-page advertisement in the 39th National Indian and Native American Employment / Public Law 102-477 Training program booklet.

<input type="checkbox"/> Check enclosed -- make payable to: NATIONAL INDIAN AND NATIVE AMERICAN EMPLOYMENT TRAINING	<input type="checkbox"/> Purchase Order # _____
<input type="checkbox"/> VISA / MasterCard (\$5.00 fee per transaction)	Card Billing Address: _____ _____ _____ INCLUDING ZIP CODE
Advertisement Total \$_____ +\$5.00 = \$_____	Card Billing Phone No.: _____
Card No. _____	Cardholder's Signature: _____
Expiration Date: _____	
Cardholder's Name (printed): _____	

PLEASE SUBMIT ADVERTISEMENT COPY TO training@cimcinc.com by March 8, 2018.

FOR INFORMATION, CONTACT:
(916) 920-0285

SPECIAL INSTRUCTIONS: _____

Mail form and payment to: Lorenda T. Sanchez, NINAETC Treasurer, 2018 NINAETC Executive Committee or Fax: (916) 641-6338
 738 North Market Boulevard, Sacramento, California 95834 Email: training@cimcinc.com

NINAETC USE: PO Amt.: \$_____ PO #. _____ Date Received: _____
 Amt. Received: \$_____ Ck# _____ Cash Credit Card Date Received: _____ SPONSOR