

Omnibus



Winter/Spring • Summer • Fall

Date: _____

Invoice to: Advertiser Advertising Agency

Have you advertised with us before? YES NO

If yes, when? _____

Note: Pre-payment in full is required for all 1x frequency insertions. Advertiser will be invoiced per issue thereafter.

Indicate amount enclosed: \$ _____

FREQUENCY RATE: 3x 2x 1x

Black and white ads only.

| ✓ | Issue | Year | Full pg | 1/2 pg | 1/3 pg | 1/6 pg Marketplace | Placement | Cost |
|---------------|---------------|------|---------|--------|--------|--------------------|-----------|------|
| | WINTER/SPRING | | | | | | | |
| | SUMMER | | | | | | | |
| | FALL | | | | | | | |
| TOTAL: | | | | | | | | |

Advertising Material Coming From: _____ Date: _____

Ad supplied on CD E-mail (300 dpi Gray Scale TIFF, EPS, JPG or "press ready" PDF files)

METHOD OF PAYMENT: Check (made out to USEA Inc. in U.S. funds only)

Visa MasterCard AmEx Card #: _____ Exp. Date: _____ CVV#: _____

Print name as it appears on card: _____

Cancellations or changes in orders cannot be accepted after the published closing date. All copy elements are subject to Publisher approval. Advertiser and/or its agency acknowledges receipt of and agrees to the terms and conditions included in the publication's current rates.

Terms: Pre-payment is required for all 1x frequency insertions. Advertiser will be invoiced per issue of advertisement thereafter. If invoice is not paid within 30 days of invoice date a 1.5% interest will be charged per month on past due accounts. **Ads will be subject to cancellation if invoice is past due 60 days.** Please see advertising rate sheet and follow the requirements on supplied artwork.

SIGNATURE REQUIRED: _____ **TITLE:** _____ **DATE:** _____

PLEASE RETURN THIS SIGNED CONTRACT WITH PAYMENT TO:
 Nancy Knight, Advertising Manager
 USEA • 525 Old Waterford Rd. NW • Leesburg, VA 20176
Phone: 703-779-0440 Ext.3007 **Fax:** 703-779-0550
E-mail: nancy@useventing.com

SEND AD MATERIAL TO:
 Dara Bailey, USEA Art Director, Publications
E-mail: dara@useventing.com
Phone: (540) 554-4842

Display Advertising Order Form

ADVERTISER: _____

CONTACT PERSON: _____

Phone: _____ Fax: _____

Email: _____

ADVERTISER'S ADDRESS:

Street: _____

Suite: _____ City: _____

State: _____ Zip: _____

AD AGENCY: _____

CONTACT PERSON: _____

Street: _____

Suite: _____ City: _____

State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____