



NEW YORK CITY GAY MEN'S CHORUS

Program Advertisement Pricing Form

Join the New York City Gay Men's Chorus in celebrating 30 Years of Music!
Purchase an advertisement in the final program
of our 30th Anniversary Season today!

High
NYU's Skirball Center
June 30, 2010
(Approximately 800 Attendees)

CLOSING DATE FOR ADVERTISEMENTS FOR HIGH IS 6/7/2010!

- Programs are 5 ½" x 8 ½", vertical.
- Ads may be four-color process, black and white or spot-color.
- Logos and graphics will be accepted in four-color or black and white camera ready form, disc or e-mail.
- All files must be submitted electronically and formatted as PDF High Resolution (preferred) or 300 dpi .jpg, .tif, or eps. NO FAXES.
- Please note that extensive artwork or special features may be subject to additional charges.
- Proofs are not available for review in advance of publication.
- Tribute ads are fully tax-deductible; general ads for products or services are not tax-deductible.

	High	
	Order by 5/14/10	Order by 6/7/10
Back Cover (5 ½ x 8 ½)	\$1,100	\$1,100
Inside Front Cover (5 ½ x 8 ½)	\$1,000	\$1,000
Inside Back Cover (5 ½ x 8 ½)	\$1,000	\$1,000
Full Page (5 x 8)	\$800	\$950
Half Page (5 x 4)	\$400	\$500
Quarter Page (2.375x4 or 5 x 2)	\$200	\$290



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Program Advertisement Order Form

**I want to place an advertisement in the
New York City Gay Men's Chorus Program**

I want to purchase a _____ (print desired ad size)

____ I want New York City Gay Men's Chorus to design my ad for an additional \$50.
(Please attach your graphic, copy, or text to be used.)

____ Advertising material will follow on: _____.

____ Ad is enclosed.

I do not wish to advertise, but would like to make a fully tax-deductible contribution of \$_____.
(A contribution of \$150 or more includes a listing in our program.)

Name: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Payment for Advertisements (circle one): Check Credit Card

Credit Card Number: _____

Expiration Date: _____ CID: _____ Billing Zip Code: _____

Name of Chorus Member who referred you: _____

*We will contact you to confirm your order within
one (1) week of receiving your request.*

Please contact Nicole Cardamone at (212) 344-1777 x4 or ncardamone@bapany.org with any questions.

***Please return completed form, ad copy, and payment to:
New York City Gay Men's Chorus, 676A 9th Avenue, Suite 405, NYC 10036***

Please submit digital images to ncardamone@bapany.org