

# ADONAL FOYLE'S 3<sup>RD</sup> ANNUAL GALA DINNER & CARIBBEAN FÊTE PROGRAM ADVERTISEMENT ORDER FORM

To: Shiyana Valentine, KLF Executive Director

Fax #: 407-999-5610

PO Box 2867, Orlando, FL 32802

[svalentine@KeroseneLampFoundation.org](mailto:svalentine@KeroseneLampFoundation.org)

## Ad Dimensions:

Full Page	Half Page	Quarter Page
4.5"W x 7.25"H	4.5"W x 3.5"H	4.5"W x 1.5"H

**I would like to order an advertisement in the Program Brochure**

- Full-page, color advertisement (\$200)
- Full-page, black & white advertisement (\$150)
- Half-page, full-color advertisement (\$125)
- Half-page, black & white advertisement (\$100)
- Quarter-page, full-color advertisement (\$75)
- Quarter-page, black & white advertisement (\$50)

**Please contact me about donating an auction item**

**Please contact me about including gifts in attendee swag bags**

## Submitting your Ad:

Please supply camera-ready art to exact size specifications in JPEG, TIFF, or PDF via email to [svalentine@KeroseneLampFoundation.org](mailto:svalentine@KeroseneLampFoundation.org).

Please check spelling, spacing, punctuation, and capitalization before submitting!

**AD SUBMISSION DEADLINE IS NOON, FRIDAY, MARCH 23, 2012**

## CONTACT INFORMATION

Company: \_\_\_\_\_

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

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

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## PAYMENT INFORMATION

Check enclosed (Please make payable to Kerosene Lamp Foundation)

Please bill me

Please charge my credit card (circle one) Visa MC Amex Discover

Name on Credit Card (PRINT): \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_ 3 or 4 Digit Security Code: \_\_\_\_\_

Billing Street Address (No P.O. Box Please): \_\_\_\_\_

