



LEXINGTON BEARS Youth Football Programs ADVERTISING

Thank you for your interest and support of our youth sports programs. Sponsorships of advertising by businesses and individuals such as yourself make it possible for us to do more for our young participants.

SPECIAL PRICES FOR PARENTS ONLY

<input type="checkbox"/> Full Page	\$120	80
<input type="checkbox"/> Half Page	\$80	50
<input type="checkbox"/> Quarter Page	\$50	30
<input type="checkbox"/> Sponsorship List	\$25	15

Advertiser/Name of Business: _____

Advertiser Contact (First & Last Name): _____

Phone: _____ Email: * _____

Address: _____

City / State / Zip: _____

* Your proof will be emailed to the address you provide for review. You may also view the proofs online as they come available by visiting: www.shoalssource.com - scroll to the bottom of the page and click on the Lexington Youth Football - Note that, unless you notify us by press date of August 10th, the ad will be assumed approved "as is." Edits to ads will not be permitted; CORRECTIONS ONLY PLEASE.

INSTRUCTIONS:

- Use the reverse side of this sheet to sketch and/or indicate what you would like for your ad to contain. **PLEASE PRINT CLEARLY** and attach any artwork to this page (please do not staple through artwork, nor tape across artwork).
- Insure that any submitted artwork is in GOOD condition for reproduction. We cannot use newsprint, yellow page prints, poor photocopies, inkjet prints or website-rendered artwork, as quality is not suitable for press production.
- Alternatively, you may email logos or other artwork to: ang@shoalssource.com Artwork should be at suitable resolution for reproduction, submitted as JPG, TIFF, or PDF. Vector-based graphic files such as EPS, or Illustrator CS5 are encouraged.
- If you are submitting photographs or other materials that must be returned to you, please make arrangements with your ad sales representative. Your representative will be responsible for their return. Please be sure your rep lists those items here. >

For "Sponsorship List" please **PRINT CLEARLY** the following information:

NAME OF SPONSOR OR BUSINESS TO BE LISTED _____

PHONE NUMBER TO BE LISTED _____

WEBSITE TO BE LISTED _____

ADDRESS TO BE LISTED _____

FOR COMPLETION BY AD SALES REP:

Ad Rep's Name: _____

Ad Rep's Phone: _____

Ad Rep's Email: _____
(You will be copied on proofs sent to your advertisers at the email address you provide here.)

Advertiser Paid By: Cash Check # _____

Indicate here if there are materials to be returned & list: _____

I agree to have my advertising placed into the 2012 program as indicated above and as shown on the back of this form and/or attached documents.

DATE _____ SIGNATURE OF ADVERTISER _____