

ADVERTISING AGREEMENT

SANDWICH PRINT SHOP
137 Route 6A • P.O. BOX 486 • SANDWICH, MA 02563
TEL: 508-888-1540 • FAX: 508-888-4185 • EMAIL: sanprint@gis.net • www.sandwichprintshop.com

Advertiser Information:

(Please fill out all information completely.)

Contact: _____

Company: _____

Business Address: _____

Town: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____ Web Address: _____

Est. Advertising Cycle: _____ Ad Cost: \$ _____

Optional Upgrade Cost: \$ _____

AVAILABLE LISTING UPGRADES:

Exclusive Category Listing (\$100)

Total Due with This Order:

Method of Payment:

\$

AD COPY (Attach Business Card Here)

Special Copy Instructions:

Area Restaurant:

Proof to be sent via: Email _____ Fax _____

If different from above information.

Send Proof to Attn: _____

Authorized by: _____ Date: _____

Printed Name: _____ Title: _____

Sandwich Print Shop Representative: _____

PAYMENT POLICY:

Payment in full is due with this order by check, debit or credit card. Authorization will be completed when you approve the ad proof. After a period of 3 business days following our submission of the proof for approval, we will reasonably consider this advertising purchase to have been accepted unless we receive further notification from you.

PLEASE MAKE CHECKS PAYABLE TO SANDWICH PRINT SHOP