

Alaska Wellness

Healthy Yellow Pages 2012

www.alaskawellness.com

.....Quality of Life

ADVERTISING ORDER

Please print clearly. Make checks payable to Alaska Wellness Magazine

Today's Date _____

Company Name _____ Owner/Manager _____

Contact E-mail address _____ Phone _____

Fax _____ Billing Address _____

_____ City _____ State _____ Zip code _____

Ad size _____ Amount enclosed \$ _____ Complementary Layout? YES NO

If not, name and email address of the person supplying the ad is: _____

I hereby authorize AK Wellness to bill my credit card this Amount : \$ _____

Account #: _____ Expiration date: _____

CCV Code _____ (on back of card) Zip Code Card is billed to: _____

Signature: _____

The undersigned hereby promises to pay Alaska Wellness Magazine (AKW) the total sum of the amount indicated above. A \$20 late fee will be charged if payment is not received by promised date or 10 days after this agreement is dated.

All listings must be emailed. AKW is not responsible for mistakes in emailed listings or missing emails. Complementary ad layouts must be proofed within 24 hours of receipt in person, by email or fax. If not, your ad will be published as is. Due to publishing deadlines we allow only one proof per ad. AKW is not responsible for ad mistakes on late proofs. All other ads must be camera ready - set up for print, in a digital format. All ads are subject to acceptance by AKW. I have read this agreement and intend to honor it.

Signature of authorized person _____

Printed name _____

Signature of AKW representative _____

For Anchorage, ER, Kenai Pen., Mat Valley: contact: Shawna 277-4775 or <adsales@alaskawellness.com>

In Fairbanks contact: Terri Babers (907) 347-3737 terribabers@gmail.com

For Layout contact: Jackie Kosednar, 272-2469 <wellness@gci.net>

8121-A Medellin Circle • fax 274-9680 ph 277-4775