

NCSS Social Education Insertion Order 2012

company/organization _____

address: _____

city: _____ state: _____ zip: _____

contact name: _____ dept title: _____

phone: _____ fax: _____

e-mail: _____

signature: _____ date: _____

Billing name and address (if different from above):

Mark the boxes below that correspond to the month(s) your ad will print. A new and separate insertion form is needed for every new ad. Artwork arriving without the intended publication name and month of issue clearly labeled will require special verification and this may affect the positioning of the ad. Please change the issue year if contract extends past 2012.

September _____

October _____

Nov/Dec _____

Jan/Feb _____

March/April _____

May/June _____

Ad Size

Full

Two-thirds vertical

One-sixth

Half Page horizontal

One-third square

Half Page vertical

One-third vertical

Preferred Positioning

cover 2

cover3

cover 4

Color Options

Black only

Process Colors (CMYK)

Ad Name/Headline/Description

Total Cost

\$ _____ Please see current advertising rates at www.socialstudies.org/advertising

Check here if your ad contains time sensitive information such as a date.

Return to Bill Doran

8555 Sixteenth Street, Suite 500, Silver Spring, MD 20910

(302) 644-0546 voice | (302) 644-4678 fax

