

Check# _____
Date _____

2009 – 2010 SPACE COAST CREW AD FUNDRAISER

ADVERTISER INFORMATION

Company _____ Contact Person _____
Address _____ City _____ Zip _____
email/website _____ Phone _____

AD OPTIONS

- | | | | |
|--|--------|--|--------|
| <input type="checkbox"/> Back Outside Cover* | 400.00 | <input type="checkbox"/> Quarter Page | 50.00 |
| <input type="checkbox"/> Inside Cover* (front or back) | 250.00 | <input type="checkbox"/> Business Card Size | 30.00 |
| <input type="checkbox"/> Full Page | 200.00 | <input type="checkbox"/> Personal Full Page | 200.00 |
| <input type="checkbox"/> Half Page | 100.00 | <input type="checkbox"/> Deluxe (color) Page | 350.00 |

**In the event of multiple ad requests for cover space, ad space goes to the earliest paid ads received by the AD Chairperson.*

SPACE COAST CREW MEMBER

Name _____ Phone _____

**ATTENTION ROWERS: PLEASE USE SEPARATE FORM FOR EACH ADVERTISEMENT. IF
HARDCOPY PROVIDED, ATTACH WITH PAPER CLIP (DO NOT STAPLE).**

------(detach receipt here)-----

SPACE COAST CREW BOOSTERS, Inc.
P.O. Box 372252, Satellite Beach, FL 32937
(a non-profit 501 C-3 organization)

Received: \$ _____ Date: _____ SCC Representative: _____

All ads must be formatted to the correct size. Please submit either:

- **digital file** on disk or email (.tif format preferred)
- **camera ready hardcopy** (give to crew member)
- *If ad is not camera ready, we will apply your payment as a donation.*

Thank you for your generous support of high school rowing in Brevard County. This program only succeeds by the financial support of our parents, rowers, and advertisers like you. For more information about crew activities and race events, visit our web site at www.spacecoastcrew.org.

Make checks payable to: SPACE COAST CREW BOOSTERS, INC. No cash please!