

# ClarinetFest® 2010

## ADVERTISING INSERTION ORDER FORM

*for the official conference program book*

Please complete and return this form to reserve advertising space in the official ClarinetFest® 2010 conference program book. A program book will be given to all conference attendees. All orders must be accompanied by payment in full and are due no later than **April 30, 2010**. All ads must be submitted as **electronic files** and must comply with the sizes below.

• **ADVERTISER INFORMATION** •

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Billing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone # \_\_\_\_\_

Fax # \_\_\_\_\_

Email Address \_\_\_\_\_

• **ADVERTISING RATES** •

All rates are indicated in U.S. dollars.  
Please specify ad type by checking appropriate box(s).

**Special EXHIBITOR Rates**

*Black & White Ads:*

- Full Page 345.00     Quarter Page (horizontal) 185.00  
 Half Page 240.00     Quarter Page (vertical) 185.00

*Color Cover Ads: Cover ads are available to EXHIBITORS ONLY and on a first come first serve basis. Please contact So Rhee at 801-867-4336 or [execdirector@clarinet.org](mailto:execdirector@clarinet.org) to check for availability. Ad size should be 8-3/4" H x 5-3/4" W. Trim size is approximately 8-1/2" H x 5-1/2" W with 1/8" bleed on each side. Color Proof required.*

- Outside Back Cover 660.00  
 Inside Front Cover 500.00  
 Inside Back Cover 475.00

**NON-EXHIBITOR Rates**

*Black & White Ads:*

- Full Page 450.00     Quarter Page (horizontal) 240.00  
 Half Page 345.00     Quarter Page (vertical) 240.00

**ADVERTISING SIZES:**

**Full Page** (no bleed) 7-1/2" H x 4-1/2" W  
(w/ bleed) 8-3/4" H x 5-3/4" W

*(NOTE: Trim size is approximately 8-1/2" H x 5-1/2" W with 1/8" bleed on each side.)*

**Half Page** 3-1/2" H x 4-1/2" W

**Quarter Page (horizontal)** 1-1/2" H x 4-1/2" W

**Quarter Page (vertical)** 3-1/2" H x 2" W

• **PAYMENT OPTIONS** •

Payment must accompany insertion order.

**TOTAL AMOUNT DUE \$** \_\_\_\_\_

*Please make checks payable to the "International Clarinet Association".*

- Check in U.S. funds  
 International Money Order  
 Please charge my credit card.  
*(Visa, MasterCard, American Express, Discover)*

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_

Signature \_\_\_\_\_

***Please return completed form, payment, and advertisement (electronic file) no later than April 30, 2010 to:***

International Clarinet Association  
c/o So Rhee, Executive Director  
P.O. Box 1310, 103 Noland Court  
Lyons, CO 80540 USA  
Email: [execdirector@clarinet.org](mailto:execdirector@clarinet.org)  
801-867-4336 / 212-457-6124 fax