



2020 DIRECTORY ADVERTISING AGREEMENT

IMPORTANT
Please reserve your spot
ASAP!

Widespread distribution

- √ All Chamber Members
- √ Insertion in relocation packets
- √ Saturate Community with thousands of copies

The Chicopee Chamber of Commerce offers the following advertising opportunities in the 2020 Business Resource & Membership Directory:

Qtr Page BW	4.5 x 2.125	\$255.00	Qtr Page Color (P)	2.25 x 4	\$325.00
Qtr Page BW	4.5 x 2.125	\$255.00	Qtr Page Color (P)	2.25 x 4	\$325.00
Qtr Page BW (P)	2.25 x 4	\$295.00	Qtr Page Color (P)	2.25 x 4	\$325.00
Qtr Page BW	4.5 x 2.25	\$295.00	Half Page Color (P)	2.25 x 8	\$995.00
Full Page BW	4.5 x 8	\$795.00	Qtr Page BW	4.5 x 2.25	\$295.00
Qtr Page BW	4.5 x 2.25	\$295.00	Qtr Page BW	4.5 x 2.25	\$295.00
3-Qtr Page Color (P)	4.5 x 6	\$995.00	Qtr Page BW	4.25 x 2.25	\$255.00
3-Qtr Page Color (P)	3.5 x 8	\$995.00	1/8th Page BW (P)	2.125 x 2.5	\$200.00
Full Spread 2 Page	10.25 x 8	\$2,000.00	Qtr Page Color	5 x 4.125	\$1,125.00
Qtr Page Color	4.5 x 2.25	\$350.00	Qtr Page Color	5 x 4.125	\$1,125.00
Qtr Page Color (P)	2.25 x 4	\$325.00	Full Page Color	5 x 8	\$1,475.00

SPECIFICATIONS

Black & White Ads must be received in Black & White

All Ads must be exact size as listed above

All ads must be emailed in PDF Format to: julie@chicopeechamber.org

All agreements are subject to approval by the Greater Chicopee Chamber of Commerce, whose liability shall be limited to the cost of the advertisement. Advertiser agrees that all terms published by the Greater Chicopee Chamber of Commerce are a part of this agreement. Must be paid in full at time of printing.

Total Cost \$ _____ Ad Size _____

Advertiser's Signature: _____ Date: _____

Invoice Me Check Enclosed - Check #: _____ Credit card # (VISA, MC, Discover, AMEX)

Credit Card # _____ Expiration Date: ____/____ Sec. Code: _____

Please mail this form to: Greater Chicopee Chamber of Commerce, 48 Center Street, Suite 201, Chicopee, MA 01013 or email to: julie@chicopeechamber.org

Business Name: _____ Contact: _____
Address: _____ City _____ State _____ Zip: _____