

MSRC Advertising Contract

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Email: info@michiganrc.org Website: www.michiganrc.org

NEWSLETTER Advertising Options & Rates

The **NEWSLETTER** is a quarterly publication. All advertisements must be camera-ready. No bleed ads are accepted. If more than one advertiser has requested special placement, space will be awarded on a first-come, first-serve basis. Each request is subject to review by MSRC executive team prior to posting. (The advertising will be limited to a total of 4 pages)

Issue Date	Copy Deadline Ad Size		N		/lember Rate	Non-Member Rate			
Spring	March 1	rch 1 Full i		10") \$	250	\$500.00			
Summer	May 1	½ Pa	age (7.5" x 5'	') \$	150	\$300.00			
Fall	August 1								
Winter	November 1								
WEBSITE Advertising Options & Rates - www.michiganrc.org									
Text Ad on Website (Job, Event, or Product Advertisement):									
Prior to posting of events an Advertising Contract (below) must be completed and all copy and images to be posted									
attached. Each request is subject to review by MSRC executive team prior to posting of the event. All information									
being posted must be relevant to the profession of respiratory therapy. Please provide JPG version of logo and text in									
word format. One hot link is included. The ad will be posted within 2 business days upon receipt of payment.									
BANNER AD on the WEBSITE: High visibility graphic-style advertising on the website home scroll page. The banner ads									
must be a static image file, size 360 pixels wide and 250 pixels high. No videos or GIFs will be accepted. One hot link									
included. Ad w	vill be posted with	in 2 business da	ys upon rece	eipt of paym	ent.				
Ad Type Men		er	Non-Member						
Text Ad \$10		00/month	th \$200/month						
Banner Ad	Banner Ad \$500/6 months		\$1100/6 months						
	\$90	00/1-year	r \$2100/1-year						
Start Date:		Immediatel	ediately		specific start date: / /				
Special instruc	tions:								

Contact Information								
Company/University Name:		Contact Name and Credentials:						
Email:								
Phone: ()								
Appli	cation for Adve	rtisement Content						
Description of Product, Service								
Provide exact wording to be posted, sent or printed:								
Payment Information								
Name on credit card:								
Billing address of credit card:								
Street address:								
City:								
State:								
Zipcode:								
Payment enclosed: Check/money order (made payable to MSRC)								
Total amount to be charged to credi	t card: \$							
☐ Visa ☐ MasterCard	Am Express	Card #:						
Expiration Date:	CVV:	Authorizing Signature:						

MSRC provides advertisements and information relative to quality professional continuing education opportunities as a service to its members. MSRC reserves the right to review events or advertisement content prior to posting. MSRC also reserves the right to refuse advertisements that do not meet the professional needs of its members or the profession of Respiratory Therapy.