



87 Bayard Street, New Brunswick, NJ 08901
 (732) 828-3433 Fax: (732) 828-5862

**The Middlesex Advocate Monthly Newsletter
 2010-11 Advertisement Form**

Advertiser: _____ Requested Publication Date(s): _____

Ad Submissions via email are preferred. All PC formats accepted. Submit to: jcowles@mcbalaw.com (*payment must be submitted with this form*). Please put a check mark in the appropriate locations below.

Advertising Rates

(check here)			(check here)		
<input type="checkbox"/>	Full Page	\$400	<input type="checkbox"/>	¼ Page	\$175
<input type="checkbox"/>	½ Page – Wide	\$275	<input type="checkbox"/>	Business Card	\$125
<input type="checkbox"/>	½ Page – Column	\$275	<input type="checkbox"/>		
<input type="checkbox"/>	⅓ Page – Wide	\$200	<input type="checkbox"/>	2-Sided Insert-Full Page	\$600
<input type="checkbox"/>	⅓ Page – Column	\$200	<input type="checkbox"/>	1-Sided Insert-Full Page	\$400

Subscriber Discounts

1st Time Subscriber Discount		Repeat Subscription Discount	
<input type="checkbox"/>	50% on 1 st Ad with 3 Ad Order	<input type="checkbox"/>	20% Discount for Full Year of Ads
<input type="checkbox"/>	50% on 1 st Two Ads with 6 Ad Order	<input type="checkbox"/>	15% Discount for 3-6 Ad Order

Company Name: _____
 Contact Person: _____
 Business Address: _____
 Phone Number: (____) _____ Email Address: _____

I hereby authorize the insertion of this ad (attached) and agree to the advertising policies that follow. All advertising is subject to the approval of the Middlesex County Bar Association, who reserves the right to refuse any advertising content that does not meet the Bar Association's standards of acceptability. The Bar Association will be responsible for errors in publication only in proportion that the error has in relation to the entire ad, as determined by the Bar Association. Liability for any error is limited to the cost of the space occupied by the erroneous advertisement.

I have filled out the form for credit card payment/enclosed a check made payable to the "Middlesex County Bar Association" in the amount indicated above.

Signature: _____ Date: _____

For Credit Card Payment Only

Method of Payment: <input type="radio"/> MasterCard <input type="radio"/> Visa <input type="radio"/> American Express		Payment Amount: \$
Credit Card #: <i>(please include code# on back of card)</i>		
Exp. Date:	Name on Card:	
Billing Address:		
Telephone #:	Email:	
Signature <i>(for Credit Card Payment Only)</i> :		

Please fax to: (732) 828-5862 or mail to: Middlesex County Bar Association; 87 Bayard Street; New Brunswick, NJ 08901. If you have any questions or need additional information, please call (732) 828-3433, extension 102.