

# HOUSTON JUNIOR WOMAN'S CLUB—HOLIDAY HAPPENING 2019

## ADVERTISING SPONSORS

Sponsoring an ad offers you the opportunity to give a gift to many children in the Houston Community

### SIZES AND COSTS FOR SPONSORING ADS

Quarter Page B&W Ad	\$125	Vertical	3" wide x 3.5"
		Horizontal	6" wide x 1.75"
Half Page B&W Ad	\$200	Vertical	3" wide x 7.5"
		Horizontal	6" wide x 3.5"
Half Page Color Ad	\$275	Vertical	3" wide x 7.5"
		Horizontal	6" wide x 3.5"
Full Page B&W Ad	\$300	Vertical	6" wide x 7.5"
Full Page Color Ad	\$400	Vertical	6" wide x 7.5"

### Art Work Requirements—Check One

Electronically Submit Artwork  
to: [hjwcads@gmail.com](mailto:hjwcads@gmail.com)

Previous Donor  
 Artwork on file

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### Please Complete the Following:

Ad Size: 1/4 page \_\_\_\_ 1/2 page B&W \_\_\_\_ 1/2 Page Color \_\_\_\_ Full Page B&W \_\_\_\_ Full Page Color \_\_\_\_

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Name of Business/Individual to List in the "Holiday Happening" Program

Date

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Address

City

State

Zip Code

Email Address

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Business Contact Name (If Different from Below)

Phone Number

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Donor's Name (Print)

Donor's Signature

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HJWC Member Name: \_\_\_\_\_

# ARTWORK:

## BLACK AND WHITE ADS:

Submit digital files, sized and configured to fit within available space

Must be PC compatible, not MAC

If necessary, unfolded, sharp high quality black/white copy may be used

For best results provide 300 dpi or higher digital images

## COLOR ADS:

Send via email on an Adobe.pdf file sized to fit 6" wide x 7.5"

## SEND ARTWORK TO:

Pam Herlitz, Program Coordinator

Cell: 832-627-4760

Email: [hjwcads@gmail.com](mailto:hjwcads@gmail.com)

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## ADVERTISING CONTRACT & PAYMENT

For Advertising Questions, please contact Donna Jackson at:

[kotilla@hotmail.com](mailto:kotilla@hotmail.com) or via cell at: 713-202-6359

Please complete and return this form with a check made payable to

Houston Junior Woman's Club to:

**Houston Junior Woman's Club (attn: Advertising Chair)**

**P.O. BOX 19684, Houston, TX 77224-9684**

Deadline is August 31, 2019

Please Charge \$ \_\_\_\_\_ to my: \_\_\_\_\_ American Express \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_