

Black & Gold



REACH 7,500 ALUMNI, CURRENT FAMILIES, AND BENEFACTORS – AND GROWING – THROUGH DIRECT MAIL
AND 80,000+ ONLINE READERS WITH EVERY ISSUE.

RATE INFORMATION

COVER POSITION	1X	3X
BACK COVER.....*N/A....	\$1,500	\$1,350
INSIDE COVER	\$1,000	\$800
INSIDE BACK	\$1,000	\$800

INTERIOR ADS	1X	3X
FULL PAGE.....	\$800	\$650
1/2 PAGE HORIZONTAL.....	\$500	\$400
1/2 PAGE VERTICAL.....	\$500	\$400
1/3 PAGE HORIZONTAL.....	\$375	\$300
1/3 PAGE VERTICAL.....	\$375	\$300

FULL PAGE

PREMIUM PLACEMENT ADDITIONAL \$100 PER ISSUE

MECHANICAL SPECS

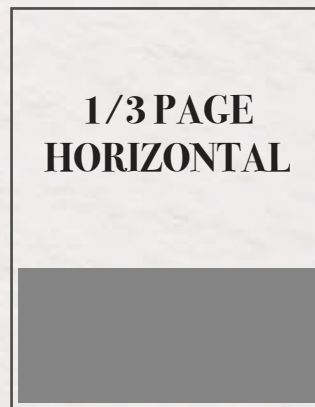
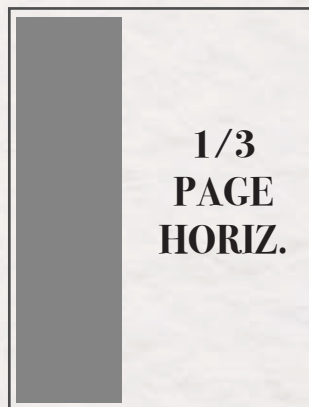
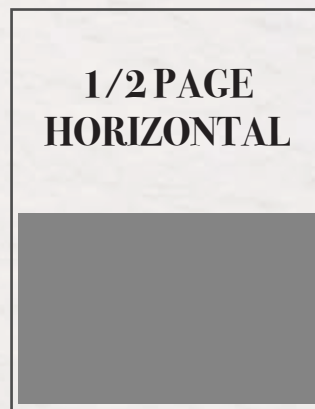
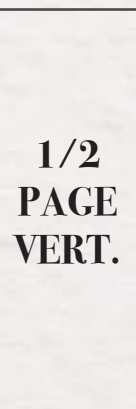
BACK COVER	TRIM SIZE: 8.5" W X 8.25" H BLEED: 8.75" W X 8.375" H
FULL PAGE	TRIM SIZE: 8.5" W X 11" H BLEED: 8.75" W X 11.25" H
1/2 PAGE HORIZONTAL	7.75" W X 4.75" H
1/2 PAGE VERTICAL	3.75" W X 9.75" H
1/3 PAGE HORIZONTAL	7.75" W X 3.125" H
1/3 PAGE VERTICAL	2.375" W X 9.75" H

FILE REQUIREMENTS

ALL IMAGES MUST BE 300 DPI OR HIGHER
LINE ART RESOLUTION BETWEEN 1200 AND 2400 DPI
PRESS READY PDF (HIGH RESOLUTION) FILES ONLY

AD DESIGN

AD DESIGN IS AVAILABLE FOR AN ADDITIONAL FEE



B&G ADVERTISING AGREEMENT

Advertiser Company Name: _____

Contact Person: _____

Billing Address: _____

City / State / Zip: _____

Phone Number: _____ Fax Number: _____

Email: _____

☐ New Advertiser ☐ Contract Renewal

Check Ad Size: ☐ 1/3 Page V ☐ 1/3 Page H ☐ 1/2 Page V ☐ 1/2 Page H ☐ Full Page (IFC or IBC or BC)

Check Frequency Rate: ☐ 1 ☐ 2 ☐ 3

Please select the issues for advertisement:

☐ Fall

☐ Winter

☐ Spring

Date Initial Artwork to be provided: _____ (If already on file, disregard)

Will new artwork be submitted for each edition? ☐ Yes ☐ No

PRICE PER ISSUE _____ WITH FREQUENCY DISCOUNT _____

TOTAL CONTRACT AMOUNT _____ CHECK ONE: ☐ PAY IN FULL ☐ BILL AT MAILING

AD DESIGN _____ TOTAL PAYMENT DUE: _____

Premium Placement? ☐ Yes ☐ No Placement Request: _____

*Please make checks payable to Bishop Verot Catholic High School
Mail to 5598 Sunrise Drive, Fort Myers, FL 33919*

Advertiser Signature: _____

Advertiser Print Name: _____ Date: _____

This Agreement must be returned to Bishop Verot