



Tuesday, January 14, 2014
 Hilton Jackson
 1001 E. Countyline Road
 Jackson, MS 39211

**2nd Annual Mississippi Association of Community Mental Health Centers
 2014 Conference Program Advertising Opportunities**

The MACMHC *Conference Program* is used daily throughout the conference by attendees. It is referred to again and again even after the conference, as it contains names and contact information for MACMHC exhibitors and sponsors.

Space and Materials Deadline: January 3, 2014

Late Fees:

If artwork is received after the deadline noted above, the advertiser will be subject to a late fee equal to 5% of the total rate amount. If artwork is received more than five business days after the deadline noted above, MACMHC reserves the right (1) to make this opportunity available to another advertiser and (2) to charge the advertiser liquidated damages equal to 50% of the total rate amount.



Contact FTC Prevention Services, LLC to reserve your space today!

ftcprevention@bellsouth.net

601-939-0020

Conference Program Advertising Rates

Ad Size	4-Color	B & W	Bleed	Trim	Live
Inside Front Cover	\$500	---	8.75" X 11.25	8.5" X 11"	8.25" X 10.75"
Inside Back Cover	\$500	---	8.75" X 11.25	8.5" X 11"	8.25" X 10.75"
Full-Page, Inside	\$500	---	8.75" X 11.25	8.5" X 11"	8.25" X 10.75"
Half-Page, Horizontal	\$350	---	8.75" X 5.75"	8.5" X 5.5"	8.25" X 5.25"
1/4 Page, Vertical	\$150	---	2.875 X 4.375	2.75 X 4.25	2.625 X 4.125
Business Card Horizontal	\$100	---	3.75 x 2.25	3.5 x 2	3.25 x 1.75



MACMHC 2014 Conference Program Book Ad Specifications January 14, 2014 | Jackson, MS

The MACMHC 2014 Conference Program Book is used daily throughout the conference by attendees and then kept to share with colleagues and to refer to when recalling vendors and defining expenditures once back in the region. Extend the impact of your brand with an ad in the MACMHC Conference Program Book.

ELECTRONIC SPECS

The Program Book will be published in 4-color process at 150 line screen and perfect bound. If you are concerned about color accuracy, your ad must be submitted with a hard copy color proof*. Please adjust B/W ads accordingly. All ads must be delivered in one of the following formats:

JPEG
TIFF
PNG
PDF

Electronic ads* should be delivered with a copy of this form via email to:

FTC Prevention Services, LLC
Email: ftcprevention@bellsouth.net
Tel: 601-939-0020

Ads larger than 5MB: Any ads larger than 5MB may be too large to send by email. You may save them to a CD or flash drive and deliver it with a copy of your Ad Form to:

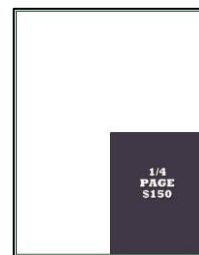
FTC Prevention Services, LLC
ATTN: Sharon Sims
310 Airport Road
Pearl, MS 39208

AD DIMENSIONS



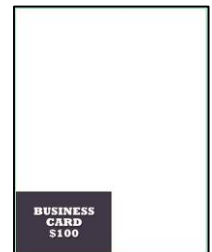
FULL PAGE W/BLEEDS
Bleed Size: 8.75" X 11.25"
Trim Size: 8.5" X 11"
Live Area: 8" X 10.5"

1/2 PAGE HORIZONTAL
Bleed Size: 8.75" X 5.75"
Trim Size: 8.5" X 5.5"
Live Area: 8" X 5"



1/4 PAGE VERTICAL
Bleed Size: 2.875" X 4.375"
Trim Size: 2.75" X 4.25"
Live Area: 2.625" X 4.125"

BUSINESS CARD HORIZONTAL
Bleed Size: 3.75" X 2.25"
Trim Size: 3.5" X 2"
Live Area: 3.25" X 1.75"



*Disclaimer: Please note that without a hardcopy proof to compare your electronic file against, we cannot guarantee that colors, fonts or images will replicate as intended. To ensure your ad is printed correctly, please send a hardcopy of your ad to the address indicated as a reference even if you have sent the ad electronically.

Please forward your payment with a copy of the Ad Form to:

Region 8 Mental Health
Attn: Emile Craig, Director of Administration
PO Box 88
Brandon, MS 39043



2014 CONFERENCE PROGRAM BOOK ADVERTISING FORM

Please complete the following information and submit with payment and ad according the instructions provided below:

Full Page (\$500)



Half Page (\$350)



Quarter Page (\$150)



Business Card (\$100)



Please **TYPE** or **PRINT** all information:

Name of Contact Person: _____
 Business/Agency: _____
 Preferred Mailing Address: _____

 Phone: _____
 Email: _____
 Website: _____

Cancellation Policy: Advertisements are non-refundable; however, may be transferred.

SEND YOUR ADVERTISEMENT
ELECTRONICALLY IN JPEG, TIF OR PDG
FORMAT TO:

Sharon Sims
ftcprevention@bellsouth.net
601-939-0020

Make check payable to:

***Mississippi Association of Community
Mental Health Centers***

SEND THIS FORM & PAYMENT TO:

Region 8 Mental Health
ATTN: Emile Craig,
Director of Administration
P.O. Box 88
Brandon, MS 39043

TOTAL AMOUNT ENCLOSED: \$ _____

Ad Materials and Prepayment Due:
Friday, January 3, 2014