

www.probioticsvideo.com

Web Advertising Insertion Order

Name:

Title:

Company:

Street Address:

City/State/Zip:

Telephone:

Fax:

Email:

Company URL for Web site Link:

Check month when advertising term will begin:

Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec.

Check section of Web site for placement:

Home Page Articles Dedication
 Quotations Blog Testimonial The Video

Check ad size and term:

	Ad Size	Term	Fee
<input type="checkbox"/>	160 x 160	per quarter	\$375
<input type="checkbox"/>	160 x 160	per year	\$1250
<input type="checkbox"/>	160 x 240	per quarter	\$500
<input type="checkbox"/>	160 x 240	per year	\$1700
<input type="checkbox"/>	160 x 307	per quarter	\$625
<input type="checkbox"/>	160 x 307	per year	\$2150

Payment must be made in advance by check or money order.. Checks must be payable in U.S. funds and be drawn on a U.S.-based bank. Make checks payable to **Dr. Steven Faber**, Regional Medical Center, 5200 N. Croatan Hwy, Kitty Hawk, NC 27949. Please print out this form and mail with your payment. Thank you.