



Program Ad Order Form

Company Name: _____

Contact Name: _____

E-Mail: _____

_____ Full Page (\$300) 7 ½" W x 10" H

_____ 1/2Page (\$150) Horizontal 7 ½" W x 4 ¾" H or Vertical 4"W x 10 ¼" H

_____ 1/4Page (\$100) 3 ½" W x 4 ¾" H

_____ Business Card (\$50)

Artwork Formats

Created as 1/color black only

- Publisher • Word • PDF • JPEG • GIF • TIF • We can create!

Please mail check to Holy Trinity School, Attn: Colleen Stalla

Please E-mail artwork to: lynchz@earthlink.net

Amount Paid: _____ Check Number: _____ Check Date: _____