

PLACE WRAP AROUND COVER
UNDER TOP SET BEFORE WRITING

AD

c o n t r a c t

Indian Creek High School - The Pack

Name of School • Name of Yearbook

P: 815-824-2197

506 S. Shabbona Rd. Shabbona, IL 60550 F: 815-824-2199

School Address • Telephone Number

Business/Service Name (please print)

Contact

Address

City	State	Zip	Area Code/Phone Number
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TYPE OF AD

AD SIZE

PAYMENT

- | | | |
|--|----------------------------------|---|
| <input type="checkbox"/> Full #240 | <input type="checkbox"/> 1/8 #30 | <input type="checkbox"/> Cash \$ _____ |
| <input type="checkbox"/> 1/2 #120 | <input type="checkbox"/> _____ | <input type="checkbox"/> Check \$ _____ |
| <input type="checkbox"/> 1/4 #60 | <input type="checkbox"/> _____ | <input type="checkbox"/> Bill \$ _____ |
| <input type="checkbox"/> Yearbook \$ _____ | TOTAL SALE _____ | AT: _____ |

Check above to

purchase a yearbook.

AD COPY • ARTWORK/PHOTO INSTRUCTIONS:

FOR STAFF USE ONLY:

Artwork should be black or a dark color on a white background

- | | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Contract approved |
| <input type="checkbox"/> | Copy received |
| <input type="checkbox"/> | Artwork received |
| <input type="checkbox"/> | Photo received |
| <input type="checkbox"/> | Ad proofed |
| <input type="checkbox"/> | Invoice sent |
| <input type="checkbox"/> | Payment received |
| <input type="checkbox"/> | Other notes |

Jennifer Westbrook

Staff Representative Signature

Customer Signature

Date

Original to Advertiser • Copy to Staff

