

FOMA

Online Classified Advertising



Contract

Contact Information

Contact Name: _____ Date: _____

Company Name: _____ Email: _____

Billing Address: _____

Phone: _____ Fax: _____

Authorization Signature for Contract: _____

Online Classified Advertising Rates (check one)

25 words or less \$15 (per month)

26-50 words \$20 (per month)

51-75 words \$25 (per month)

Month(s) Online Ad to Run

Jan Apr July Oct

Feb May Aug Nov

Mar June Sept Dec

Ad Text Submitted via

Email to fomapr@earthlink.net
(Put FOMA ONLINE CLASSIFIED AD in the subject of the email)

Fax to (850) 942-7538

Mail contract and ad copy to:
FOMA
2007 Apalachee Parkway
Tallahassee, FL 32301

Payment Method

\$_____ charge per month x _____ months = \$_____ Total

Check MC VISA AMEX

Card # _____

Expiration Date: _____ Security ID # (3-4 digits): _____

Name on Card: _____

Signature: _____

(By signing this form, you authorize the FOMA to charge your credit card the total amount listed above.)

Submission

Complete and Submit this form to:

Florida Osteopathic Medical Assn.
Attn: Jena Glantz
2007 Apalachee Parkway
Tallahassee, FL 32301

or

Fax to: (850) 942-7538

Your classified ad will appear on the FOMA Website at www.foma.org in the Job Opportunities section for the number of months specified.

All advertising is subject to approval by the Florida Osteopathic Medical Association.

Questions? Call Jena Glantz at (850) 878-7364 or email: fomapr@earthlink.net