

**Conference ADVERTISEMENT Order Form**

Name \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

I want an advertisement included in the conference print materials for LAGPA's annual LGBT psychotherapy conference. This includes both the *Call to Conference* brochure and *Conference Program*. I am requesting the following advertisement size (Check One):

- \$ 60 Business Card Size     
  \$ 95 ¼ page     
  \$165 ½ Page  
 \$245 Full Page     
  \$415 Back Page     
  \$495 Full Page Insert  
on color stock

NOTE: If you pay twice the rates listed above, we will publish the same ad in our quarterly newsletter— *Progress Notes*— for one year. This is less than half the usual cost for advertising in the PN for a year.

Mechanical Information may be submitted in color but there is no promise the final printing will be in color:  
 Full Page— 7.5"x10"; ½ Page (h)—7.5"x4.95"; ½ page (v) 3.7"x10"; ¼ page 3.7"x4.95"; Business Card 3"x2.5"  
 Advertising Copy: You may either send up camera-ready copy or have us lay it out.

- Write your copy on the back of this form and mail it to Chuck Stewart.
- Email to Chuck Stewart a separate file in jpg, pdf, tiff, Word, Illustrator, or Photoshop format.
- Attach a business card and we'll scan it into the document.

*We reserve the right to make minor modifications as necessary, not affecting the ad content, to meet printing requirements. Current LAGPA or SCLMA members receive a 10% discount on all ads.*

**TO HAVE YOUR ADVERTISEMENT INCLUDED IN THE *CALL TO CONFERENCE* BROCHURE (WHICH IS DISTRIBUTED TO A LIST OF ALMOST 1,000 MENTAL HEALTH PROFESSIONALS AND ORGANIZATIONS) FULL PAYMENT IS REQUIRED BY AUGUST 14. ADVERTISEMENT REQUESTS RECEIVED AFTER AUGUST 14 WILL BE INCLUDED IN THE *CONFERENCE PROGRAM* DISTRIBUTED TO ALL CONFERENCE REGISTRANTS.**

**PAYMENT**

**CHECK:** \$ \_\_\_\_\_ made payable to: LAGPA  
**OR**  
**CHARGE:**  VISA  Master Card  Am. Exp.  Disc.  
 \_\_\_\_\_  
 Name of Cardholder (as it appears on card) (print clearly)  
 \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_  
 Credit Card Number (print clearly)  
 Authorizing  
 Signature \_\_\_\_\_  
 Total Amount To Be Charged \$ \_\_\_\_\_

Mail form, checks, and camera-ready copy to:  
 Chuck Stewart  
 LAGPA Executive Director  
 3722 Bagley Ave. #19  
 Los Angeles, CA 90034-4113

You may also email ad copy to LAGPA@sbcglobal.net If you are using credit card payment method, you may fax to 310-838-6769.

For additional information, call Chuck Stewart at 310-838-6247