



# 2011-12 LOCAL ADVERTISING AGREEMENT for NYSPHSAA State Championship Programs

<b>FOR OFFICE USE ONLY</b>
Pd. Date _____
Check # _____
Amount _____
Size _____
SP _____

Make checks payable to:  
**NYSPHSAA**  
 8 Airport Park Boulevard, Latham, NY 12110  
 Attn: Advertising Department

*All advertising inquiries can be directed to the Director of Marketing, Joe Altieri at (518) 690-0771 or fax at (518) 690-0775.*

**LOCAL RATES:** Apply ONLY to: Individual High School, Team Booster Clubs, HS Coaches Assoc, HS Officials Assoc, Parents, Small businesses

**NEW ADVERTISING SIZES AND RATES** \*See other side for list of Sports & Deadlines

# of Sports	List Sport(s) ↓	Full Pg 7.5 x 9.75	1/2 Pg-Hor 7.5 x 4.75	1/2 Pg-Vertical 3.625 x 9.75	1/4 Pg-Hor. 7.5 x 2.25	1/4 Pg-Vertical 3.625 x 4.75
1	_____	\$ 215	\$ 150	\$ 150	\$ 100	\$ 100
2	_____	\$ 325	\$ 225	\$ 225	\$ 150	\$ 150
3	_____	\$ 405	\$ 275	\$ 275	\$ 195	\$ 195
4	_____	\$ 600	\$ 405	\$ 405	\$ 325	\$ 325
5	_____	\$ 725	\$ 550	\$ 550	\$ 400	\$ 400
6	_____	\$ 900	\$ 700	\$ 700	\$ 450	\$ 450
7	_____	\$ 1,050	\$ 805	\$ 805	\$ 495	\$ 495
<b>All 25 Sports</b>	.....	\$ 1,500	\$ 960	\$ 960	\$ 650	\$ 650

*Add \$150 per program for back cover, inside back cover and inside front cover in full color.*

**NOTE:** Advertiser agrees to furnish copy and/or artwork. If no material is submitted for paid ad space, publisher shall use own discretion on creating ad copy. Publisher cannot accept any corrections after deadlines. Publisher will not assume liability for accuracy of advertising copy. Acceptable camera-ready copy is requested for all ads. Unless otherwise stated on this agreement, publisher will not provide advertiser proofing opportunity. Requests for published programs must be submitted in writing or e-mail. **All ads and inquiries must be emailed to Joe Altieri at: altieri@nysphsaa.org.**

**\*\*ALL AD DEADLINES ARE 3 WEEKS BEFORE EACH STATE CHAMPIONSHIP\*\***

Authorization: ..... Date: .....

Company ..... Print Name: .....

Street ..... Advertising in # of Sports Program: .....

City/State/Zip ..... Advertising Rate (above): \$ .....

Telephone: ( ) ..... Options (above): \$ .....

Fax: ..... Total Due: \$ .....

Email: ..... DEPOSIT: \$ .....

**AD COPY INSTRUCTIONS**

Ad Size: \_\_\_\_\_

Other Instructions/Comments \_\_\_\_\_

- Please check one of the following:*
- Same Ad as Last Year (SALY)  
 or  
 Camera Ready Artwork Enclosed  
 or  
 Please create

**TO EXECUTE YOUR AD COMMITMENT:**

\* Sign and complete this advertising agreement

\* Submit your payment

\* E-mail your advertisement camera-ready (exact sizes as above)