



115 East Gray Street  
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 www.normanchamber.com

# TRC 2019

Volunteer \_\_\_\_\_

<b>Office Use Only:</b> Member ID _____ Password _____
Date Rec'd _____ TRC Database _____ CC Assist _____

## ADVERTISING CONTRACT

### Company Information

Company Name \_\_\_\_\_

Advertising Contact\* \_\_\_\_\_

Email \_\_\_\_\_

Company Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Approved by (please print) \_\_\_\_\_

Approved by (please sign) \_\_\_\_\_ Date \_\_\_\_\_

*\*Advertising contact will receive all advertising-related communications and materials*

### Advertisement Information

Publication	Ad Size	Ad Cost

Total \_\_\_\_\_

**By signing above, I agree, on behalf of the company listed above, to provide written notice to the Norman Chamber of Commerce of cancellation of any or all of the above advertisement(s) at least two (2) months prior to the publication date.**

**This contract is not complete until it has been reviewed and accepted by the Chamber. Once accepted, I will receive a copy of the contract signed by the Chamber staff.**

**NO REFUND WILL BE ISSUED FOR CANCELLATIONS WITHIN TWO (2) MONTHS OF THE EVENT. PAYMENT IS DUE 30 DAYS PRIOR TO EVENT DATE.**

### PAYMENT INFORMATION

Cash  Check  Visa  Mastercard  Am. Ex.  Discover  Invoice Me (I understand payment is due 30 days prior to event date)

*Please make checks payable to "Norman Chamber of Commerce"*

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_

Signature \_\_\_\_\_ **GRAND TOTAL** \_\_\_\_\_

### CHAMBER OFFICE USE ONLY

Vice President, Member Services and Sales \_\_\_\_\_ Date \_\_\_\_\_

# ADVERTISING CONTRACT

## Instructions

1. Verify the purchasing company is a current member of the Chamber.
2. Please print or type all information.
3. Indicate the publication and the year in which the ad will appear.
4. Complete the section on the company. The advertising contact will receive all advertising-related materials whereas your designated billing representative will receive the advertising invoice. Please make sure to list the appropriate person's name and phone number. Make sure address is where correspondence is to be sent.
5. Have the appropriate person approve the agreement by printing and signing his/her name. Please note that the person authorized to approve the agreement may be different from the advertising contact, who receives all advertising-related materials.
6. Indicate ad size and ad type if applicable.
7. A letter of confirmation with specific information (ad specs, deadlines, etc.) will be sent to the company.

**Please complete the contract in full.**