



The Impressions

ADVERTISING RATES & INSERTION AGREEMENT

Publication of the Orange County Dental Society

295 S. Flower Street ● Orange, California 92868-3414 ● Off: 714.634.8944 ● Fax: 714.978.2686 ● Email: advertising@ocds.org

PUBLICATION DETAILS

PUBLICATION DEADLINES

Camera Ready Artwork & Payment Due By

Winter edition: January 8
 Spring edition: April 15
 Summer edition: July 15
 Fall edition: October 15

Frequency: Quarterly
Trim Size: 8.375 x 11
Artwork Format: 300 dpi
 PDF preferred, JPEG acceptable

Publication Set Copy

Lacking a layout or specific instruction, copy will be set at OCDS discretion. Design and alterations will be charged to advertiser.

Advertising Rates & Insertion Order

| <u>Check Appropriate Boxes:</u> | | <u>Color Ads</u> | | | <u>B/W Ads</u> | | |
|--|---------------|--------------------------------|---------------------------------|-----------------|--------------------------------|---------------------------------|-----------------|
| | | <u>1 Time</u> | <u>4 Time Rate</u> | | <u>1 Time</u> | <u>4 Time Rate</u> | |
| <input type="checkbox"/> FULL PAGE BLEED | 8.6 X 11.25 | <input type="checkbox"/> \$600 | <input type="checkbox"/> \$2240 | (\$560 / issue) | <input type="checkbox"/> \$300 | <input type="checkbox"/> \$1040 | (\$260 / issue) |
| <input type="checkbox"/> FULL PAGE w/o BLEED | 7.375 X 9.75 | <input type="checkbox"/> \$550 | <input type="checkbox"/> \$2040 | (\$510 / issue) | <input type="checkbox"/> \$280 | <input type="checkbox"/> \$960 | (\$240 / issue) |
| <input type="checkbox"/> HALF PAGE | 7.375 X 4.75 | <input type="checkbox"/> \$370 | <input type="checkbox"/> \$1320 | (\$330 / issue) | <input type="checkbox"/> \$180 | <input type="checkbox"/> \$560 | (\$140 / issue) |
| <input type="checkbox"/> QUARTER PAGE | 3.687 X 4.675 | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$840 | (\$210 / issue) | <input type="checkbox"/> \$125 | <input type="checkbox"/> \$340 | (\$85 / issue) |
| <input type="checkbox"/> EIGHTH PAGE | 3.687 X 2.25 | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$640 | (\$160 / issue) | <input type="checkbox"/> \$95 | <input type="checkbox"/> \$220 | (\$55 / issue) |

Preferred Positions - Color Only:

| | <u>1 Time</u> | <u>4 Time Rate</u> | |
|---|--------------------------------|---------------------------------|-----------------|
| <input type="checkbox"/> Inside Front Cover Full Page | <input type="checkbox"/> \$700 | <input type="checkbox"/> \$2640 | (\$660 / issue) |
| <input type="checkbox"/> Inside Back Cover Full Page | <input type="checkbox"/> \$650 | <input type="checkbox"/> \$2440 | (\$610 / issue) |
| <input type="checkbox"/> Outside Back Cover Two Thirds Page | <input type="checkbox"/> \$425 | <input type="checkbox"/> \$1540 | (\$385 / issue) |
| <input type="checkbox"/> Centerfold Full Page Right Side | <input type="checkbox"/> \$800 | <input type="checkbox"/> \$3100 | (\$775 / issue) |
| <input type="checkbox"/> Centerfold Full Page Left Side | <input type="checkbox"/> \$750 | <input type="checkbox"/> \$2900 | (\$725 / issue) |

Check Issue Insertion Order To Begin

| | | |
|--|--------|---------------|
| | Winter | Jan/Feb/Mar |
| | Spring | Apr/May/June |
| | Summer | July/Aug/Sept |
| | Fall | Oct/Nov/Dec |

- Preferred Location Requested \$50 per insertion – additional fee
- Classified Ads: \$30 for first 25 words; \$0.60 for each additional word.

Amount Due: _____ **Number of Insertions @ \$** _____ **per insertion + any additional fees \$** _____ **Total Due \$** _____

Payment Information

Enclosed is a check in the amount of \$ _____ (Check must accompany ad submission)

Charge my credit card: VISA/MC American Express Discover Card

Credit Card No. _____ Exp _____ Code _____

Billing Address # _____ Zip _____

Client / Advertiser (Company): _____ Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact No: _____ Fax: _____ Email: _____

Authorized Signature _____ Date _____

Name (Print) _____ Position _____

Please Review and Accept OCDS Advertising Policies on next page



Orange County Dental Society

295 S. Flower St., Orange, CA 92868

Office: (714) 634-8944 FAX: (714) 978-2686

ADVERTISING POLICY

- All advertising is subject to acceptance by the Orange County Dental Society as to character, content, layout, text and design.
- Accepted advertising must be related to dentistry or provide a benefit to the membership.
- The advertisements must be accurate, legal, ethical, and in appropriate taste as determined by the *Impressions* editorial staff.
- Advertising by non-ADA member dentists for services provided which directly compete with the services provided by OCDS member dentists will not be accepted.
- Advertising ad format is limited to display ads only and **MUST BE** submitted as camera ready art format (minimum 300 dpi in CMYK, JPEG or PDF format).
- Printed inserts are restricted to OCDS membership events and meetings.
- Written articles will not be accepted as advertising
- Multiple insertion contracts must be completed within one year from date of first insertions to earn a frequency discount. If advertiser chooses to not fulfill the term of the contract, they will be required to pay the "single insertion" price for ads already placed.
- Cancellations must be received in writing prior to publications deadline date. No cancellations will be accepted after the deadline. Acceptance of any ad after deadline is subject to approval of OCDS.
- Publisher shall not be liable for any cost or damages if for any reason ad fails to be published in the issue selected by advertiser.
- Advertising is accepted with the understanding that all terms, conditions in the advertising policies are acceptable to the advertiser and/or his agent.
- Orange County Dental Society prohibits advertisements directly or indirectly participating in political campaigns on behalf of (or in opposition to) any candidate for elective public office.

Authorized by: _____ Title: _____

Signature _____ Date _____

