



CAROLINAS CHAPTER

M E E T I N G P R O F E S S I O N A L S I N T E R N A T I O N A L

2011-2012 Online Directory and Web Page Advertising Ad Rates, Specs & Order Form

Choose directory page and write in your 1st and 2nd choices below. Indicate if Member Non-Member
The appropriate rate for your choices below will apply. All rates are net non-commissionable.

Choice (1st, 2nd)	Online Directory	Yearly Member Rate	Yearly Non-Member Rate
	1. Table of Contents/Home Page (Limited to 1 Advertiser)	\$2048	\$2625
	2. Membership Listing (Limited to 3 Advertisers)	\$1000	\$1400
	3. Planners/Students (Limited to 3 Advertisers)	\$1000	\$1400
	4. Suppliers (Limited to 3 Advertisers)	\$1000	\$1400
	5. Geographical Planner/Student (Limited to 3 Advertisers)	\$1000	\$1400
	6. Geographical Supplier (Limited to 3 Advertisers)	\$1000	\$1400
	7. Enhanced Listing (Link to Website and Email)	\$200	N/A

Choice (1st, 2nd)	Web Page Banner Ads	Size	Monthly Rate (Member/Non-Member)
Home Page - Ad rotates throughout entire website, guaranteed 20% visibility			
	1. Vertical Banner (Limited to 5 Advertisers)	120 x 600	\$350
	2. Button Ads (2) (Limited to 5 Advertisers Each)	160 x 100	\$250
Other Pages - Ad rotates throughout entire website (except home page)			
	3. Vertical Banner (No Limit to Advertisers)	120 x 600	\$350
	4. Button Ad (No Limit to Advertisers)	160 x 100	\$250

Material Specifications

Ad	Dimensions	File Size	Format
Membership Directory Pages Ads	600w x 400h Pixels (72dpi)	50K Max.	GIF, JPEG, Flash (up to version 6.0)
Vertical Banner	120w x 600h Pixels (72dpi)	40K Max.	GIF, JPEG, Flash (up to version 6.0)
Button Ad	160w x 100h Pixels (72dpi)	10K Max.	GIF, JPEG, Flash (up to version 6.0)

Advertiser: _____

Company: Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Agency: Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Authorized Signature: _____ Print Name: _____

Submit order form/materials to:

Christine Flores
1800 Camden Road, Suite 107, #213
Charlotte, NC 28203

Phone: (704) 377-5648
Fax: (704) 333-6927
Christine@TheManagementOffice.com

FORM OF PAYMENT (Circle one): VISA MC AMEX CHECK

*If paying with a check, a credit card number is required to confirm order.

Credit Card Number: _____ Name on Card: _____

Expiration Date: _____ Authorized Signature: _____

Visit our web site www.mpi-cc.org for additional advertising opportunities!