



Advertising Opportunities



WE ARE UNIQUE.
Parent to Parent of Miami is the only organization in South Florida serving families of children with all types of disabilities.

INSIDE FRONT OR INSIDE BACK COVER . . . \$650

- Bleed: 8.5" X 11"
- Trim: 8.25" X 10.75"
- Live: 8" X 10.5"

PREMIUM FULL PAGE . . . \$500

- Bleed: 8.5" X 11"
- Trim: 8.25" X 10.75"
- Live: 8" X 10.5"

FULL PAGE . . . \$350

- Bleed: 8.5" X 11"
- Trim: 8.25" X 10.75"
- Live: 8" X 10.5"

HALF PAGE VERTICAL . . . \$200

- Bleed: 5.5" X 8.5"
- Trim: 5.25" X 8.25"
- Live: 5" X 8"

QUARTER PAGE . . . \$125

- Bleed: 4.25" X 5.5"
- Trim: 4" X 5.25"
- Live: 3.75" X 5"

HALF PAGE HORIZONTAL . . . \$200

- Bleed: 8.5" X 5.5"
- Trim: 8.25" X 5.25"
- Live: 8" X 5"

BUSINESS CARD . . . \$75

- Bleed: 4.25" X 3.67"
- Trim: 4.125" X 3.5"
- Live: 4" X 3.5"

**ALL ARTWORK SHOULD BE SUBMITTED AS HIGH RESOLUTION (300 DPI) TIF, JPG OR PDF FILES.
PROGRAM BOOK PRINT DEADLINE IS OCTOBER 21, 2011.**

All ads will be featured in Parent to Parent of Miami's Journey of Dreams program book.
To confirm your 2011 Journey of Dreams program book advertisement, please fax this form to 305.271.6628.

I am committed to purchasing the following advertisement(s):

- Inside Front Cover (\$650)
 Inside Back Cover (\$650)
 Premium Full Page (\$500)
 Full Page (\$350)
 Half Page Vertical (\$200)
 Half Page Horizontal (\$200)
 Quarter Page (\$125)
 Business Card (\$75)

CONTACT:

Company: _____
 Address: _____

 Contact Person: _____
 Tel: _____
 Email: _____

PAYMENT:

CHECK BILL ME
 AMEX VISA MC
 Number: _____
 Expiration: _____ Sec. Code: _____
 Cardholder: _____
 Signature: _____