



# DOWNTOWN *Life*

## Advertisement Request Form

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Name of Advertiser: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

E-mail: \_\_\_\_\_

Month(s) Advertisement to be included: \_\_\_\_\_

Type of Advertisement: (Please circle your choice)

	Month	6 Months	12 Months
Business Card	\$ 30.00	\$ 162.00	\$ 324.00
Quarter Pg.	\$ 50.00	\$ 270.00	\$ 540.00
Half Pg. Horizontal/Vertical	\$ 80.00	\$ 432.00	\$ 864.00
Half Pg Column	\$ 40.00	\$ 216.00	\$ 432.00
Full Pg. Column	\$ 65.00	\$ 390.00	\$ 702.00
Full Pg Inside	\$250.00	\$ 1,350.00	\$ 2,700.00
Full Pg Back Pg	\$350.00	\$ 1,890.00	\$ 3,780.00

1. All graphics and artwork submitted in computer file form either by e-mail or hard disc.
2. All text submitted in writing either by e-mail or hard copy disc or paper.
3. Remit the fee chosen above by check or money order made payable to the **Rahway Center Partnership. There will be NO REFUND.**
4. **Deadline for all Advertising information is the 15<sup>th</sup> of the month prior to the issue you wish the AD to appear .**

**Return to: PO Box 1711  
Rahway, NJ 07065  
732-396-3545 FAX: 732-396-3693  
E-mail: rcpmail@aol.com**

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SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

Office Use Only

Half Page

Dimension 7 X 4<sup>1</sup>/<sub>2</sub> or 4<sup>1</sup>/<sub>2</sub> X 7

Price \$80.00

Business Card

Dimension 2 X 3<sup>1</sup>/<sub>2</sub>

Price \$30.00

Quarter Page

Dimension 3<sup>1</sup>/<sub>2</sub> X 4<sup>1</sup>/<sub>2</sub>

Price \$50.00

Full Page  
Dimension 7 X 9  
Inside \$250.00  
Back Page \$350.00

Full Page Column  
Dimension  $1\frac{3}{4}$  X 9  
Price \$65.00

Half Page Column  
Dimension  $1\frac{3}{4}$  X  $4\frac{1}{2}$   
Price \$40.00