

Orthopaedic Physical Therapy Practice

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ADVERTISING INSERTION ORDER FORM

ADVERTISER/CLIENT INFO.

Advertiser:	Contact Person:	
Address:	Phone: ()	
City, State, Zip:	Fax: ()	
	E-Mail:	
Signature of Advertiser:	Date:	

$\sqrt{\text{CHECK SIZE, RATE, & ISSUE(S). ALL RATES ARE NONCOMMISSIONABLE.}}$

Ad Size	Width	Height	1x Rates (per issue)	4x
Full page, no bleeds	7.5"	9.875"	\$575	\$525
Full page with bleeds	8.375"	10.875"	\$575	\$525
Half page (H)	7.5"	4.8125"	\$375	\$325
Half page (V)	3.625"	9.875"	\$375	\$325
Quarter page	3.625"	4.8125"	\$275	\$225
PREMIUM RATES:		МЛ /		
Inside Front Cover	7.5"	9.875"	\$775	\$725
Inside Back Cover	7.5"	9.875"	\$775	\$725
¹ / ₂ page Outside Back Cover	7.5"	4.8125"	\$825	\$775
Page 1 – opposite IFC	7.5"	9.875"	\$725	\$675
Page 2 – opposite TOC	7.5"	9.875"	\$675	\$625
Opposite Inside Back Cover	7.5"	9.875"	\$675	\$625

Quoted prices above are for black and white ads only. Additional charge per ad of \$350 for 4-color ads; additional charge per ad of \$100 for 2-color ads. <u>Any requested revisions to previously submitted ads, will incur a \$25 service charge.</u>

TRIM SIZE: 8.375" x 10.875" **PAPER STOCK**: All coated **BINDING**: Saddle stitched

MATERIAL SUBMISSION: Your advertisement should be submitted electronically in PDF format only to Sharon Klinski at sklinski@orthopt.org. For best quality when printing, all images should have a minimum effective resolution of 300 dpi. Use the Press Quality setting in Acrobat Distiller. If files need to be black only, please make sure that the file contains no CMYK or RGB, and is saved as grayscale.

2016/2017 CLOSING DATES:

ISSUE	SPACE RESERVATION	AD MATERIAL	MAIL DATE
Vol. 29 No. 1	November 18, 2016	November 25, 2016	January 13, 2017
Vol. 29 No. 2	March 3, 2017	March 10, 2017	April 14, 2017
Vol. 29 No. 3	May 26, 2017	June 2, 2017	July 14, 2017
Vol. 29 No. 4	August 11, 2017	August 18, 2017	October 13, 2017