



Phone: 304-680-0707
Address: 353 N. Porter St
Waynesburg, PA 15370
Email: soupsmarketing@gmail.com
Website: www.soupsmarketing.com

Shop Waynesburg Business Packages Agreement

Business Name: _____

Physical Address: _____

City, State, Zip: _____

☐ Check if mailing address same as above

Mailing Address: _____

City, State, Zip: _____

Name of Authorized Person: _____

Premier Business Package Options (Initial your choice):

Includes all Large Package Front Page Benefits listed on the Business Packages Sheet.

_____ ½ Page Ad Front \$1,000 (4"x7") _____ ¼ Page Ad Front \$750 (4"x3.5")

_____ ½ Page Ad Back \$700 (4"x7") _____ ¼ Page Ad Back \$550 (4"x3.5")

Economy Business Package Options (Initial your choice)

_____ Business Card Size Ad Front \$500 (2"x3.5")

Includes all Large Package Front Page Benefits listed on the Business Packages Sheet.

_____ Business Card Size Ad Back \$350 (2"x3.5")

Includes all Large Package Back Page Benefits listed the Business Packages Sheet.

_____ Small Package \$100 (Line listing of your business)

Includes all Small Package Benefits listed on the Business Packages Sheet.



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Terms and Conditions: This agreement is for advertisement space for the Shop Waynesburg 2016 Premiere issue that is to be distributed through the Greene County Messenger, Observer Reporter, Waynesburg Christmas Parade and participating business locations across Greene County. This promotion also will be promoted on WANB local radio and Social Media. Client is responsible for producing ad. Soup's Marketing can create and produce an ad for an extra \$75.

Please Initial All That Apply:

_____ 50% non-refundable deposit required to secure a spot on the
Shop Waynesburg Ad for your choice Business Package.
_____ \$75 Ad production fee
_____ Final Payment is due by 12/31/16

Authorized Signature: _____

Soup's Marketing Representative (Print): _____

Soup's Marketing Representative Signature: _____

Credit Card to be on file:

Credit Card will only be charged on 1/1/2017 for the full remaining balance if Final Payment hasn't been received.

Name on Card: _____

Please Circle:

VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Card Number: _____

Expiration: _____ **3 Digit Security Code (4 for AMEX):** _____

Authorized Signature: _____