FRANKLIN PERFORMING ARTS COMPANY



Advertisement Form



Cabaret

need to be formatted and type-set. Quarter Page \$50.00 Ad Design \$30.00 Please email ad copy to ads@fpaconline.com DEADLINE: June 1 Program size (8 1/2 x 5 1/2) Ad sizes are as follows: Full Page — 4 ½" w x 7 ½" h Half Page — 4 ½" w x 3 5/8" h Program size (8 1/2 x 5 1/2) Ad Sizes are as follows: Full Page — 4 ½" w x 7 ½" h Discover Card	Full Page \$125.00	You may provide your completed ad in jpg, png, gif, pdf format, or in Microsoft Publisher. Please
Ad will be Black and White. Full Page Special Positions Available in Color. Program size (8 1/2 x 5 1/2) Ad sizes are as follows: Full Page – 4 ½" w x 7 ½" h Half Page – 4 ½" w x 3 5/8" h Quarter page – 4 ½" w x 1 7/8" h Cast Member: Contact person for this ad: Franklin Performing Arts Company 15 West Central Street P.O. Box 48 Franklin, MA 02038 508-528-33 www.fpaconline.com Please email ad copy to ads@fpaconline.con DEADLINE: June 1 Please email ad copy to ads@fpaconline.con Check Visa Mastercard Discover Card This form must be turned in with payment be emailing ad copy Thank You! Phone #: Franklin Performing Arts Company 15 West Central Street P.O. Box 48 Franklin, MA 02038 508-528-33 www.fpaconline.com	Half Page \$75.00	add an additional \$30.00 for all playbill ads that need to be formatted and type-set.
Full Page Special Positions Available in Color. Program size (8 1/2 x 5 1/2) Ad sizes are as follows: Full Page - 4 ½" w x 7 ½" h Half Page - 4 ½" w x 3 5/8" h Quarter page - 4 ½" w x 1 7/8" h Contact person for this ad: Franklin Performing Arts Company 15 West Central Street P.O. Box 48 Franklin, MA 02038 508-528-33 www.fpaconline.com Production Requirement Receipt Name Date	Quarter Page \$50.00	Ad Design \$30.00
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Email address: Franklin Performing Arts Company 15 West Central Street P.O. Box 48 Franklin, MA 02038 508-528-33 www.fpaconline.com Production Requirement Receipt Name Date	Ad sizes are as follows: Full Page – $4\frac{1}{2}$ " w x $7\frac{1}{2}$ " h Half Page – $4\frac{1}{2}$ " w x $3\frac{5}{8}$ " h Quarter page – $4\frac{1}{2}$ " w x $1\frac{7}{8}$ " h	Check Visa Mastercard Discover Card This form must be turned in with payment before emailing ad copy Thank You!
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Name Date	15 West Central Street P.	O. Box 48 Franklin, MA 02038 508-528-3370
	Production Requirement Receipt	
Amount Show Office Confirmation	Name	Date
	Amount Show	Office Confirmation