



Best of Oceanside Business Directory & Community Guide 2017 Advertising Agreement

Company: _____
Contact: _____
Address: _____
Billing Address (if different): _____
City, State, Zip: _____
Phone: _____
Ad Classification: _____
Special Instructions: _____

Terms & Conditions of This Agreement

With an authorized signature below, the Oceanside Chamber of Commerce will treat this as a binding contract. The liability of the Oceanside Chamber of Commerce in the event of any printing errors or omissions (including total omission) is limited to the amount paid for the items that are omitted or in which the errors occur for the issue life of the Directory. Please keep the bottom of this form for your records. Return the white original to the Oceanside Chamber of Commerce. An authorized signature indicates acceptance of these terms and conditions. The Oceanside Chamber of Commerce reserves the right to refuse advertising and refund all payments for advertising refused.

Ad Size _____

Additional Costs or Discounts

\$ _____

\$ _____

\$ _____

\$ _____

TOTAL \$ _____

Paid AMT. \$ _____

Balance Due \$ _____

Method of Payment

☐ American Express

☐ MasterCard

☐ Visa

☐ Check

☐ Cash

☐ Bill Me

Make Checks Payable to: Oceanside Chamber of Commerce

If Paying by Credit Card:

Account # _____

Expiration Date _____

Security Code _____

Advertisers Printed Name: _____

Advertisers Signature: _____

Today's Date: _____

Please Return Completed Form To:

Oceanside Chamber of Commerce, ATTN: Scott Ashton 928 North Coast Highway, Oceanside, CA 92054
EMAIL: scott@oceansidechamber.com or FAX: 760-722-8336