

Business Information:

Company	Dusmess n			
Company: Contact:				
Physical Address: State:	Zip oodot			
Billing Address <i>(if different)</i> :	zip code:			
Billing Address (<i>if different</i>): Business Phone: ()	Coll/Mobile: ()			
Primary Email:				
	Ad Info	rmation:		
Ad Size(s):		Ad Source Options:	Ad Occurance:	
Note: All Display ads Include Enha	nced Listing with Logo		_	
Double Tuck Center	Full Page	Supplied by Advertiser	Annual Package	
	U	Ad Build Service	One-Time Ad Selection	
	/2 Page	$\Box \operatorname{Pickup} (Renewing ads only)$		
	/3 Page			
	/4 Page			
Last Page	/8 Page			
	Paymen	t Details:		
Payment Plan: To	otal: \$ Paid An	nount: \$ = Balance	Due: \$	
Monthly M	lethod of Payment			
Quarterly \Box American Express \Box MasterCard \Box Visa \Box Check \Box Cash \Box Bill me				
□ Annually □	American Express L Master	rCard \Box Visa \Box Check \Box Ca	ash 🗆 Bill me	
· M	ake Checks Payable to: Ocea	nside Chamber of Commerce		
Advertisers Print Name:				
Advertisers Signature:				
Date:				
		ns of This Agreement		
		erce will treat this as a binding contract.		
		(including total omission) is limited to the lication. The Oceanside Chamber of Co		
		Oceanside Chamber will not publish adv		
		ts or services in violation of either state,		

Credit Card Information (If applicable)

ordinance. An authorized signature indicates acceptance of these terms and conditions.

Card #		Exp. Date:	CVV:
Name on Card:	Street Address:	-	City, State, Zip:
Signature:			Date:
0			