

2015 Advertisement Registration & Specifications FORM for:

# PEPTALK 2015

January 19 – 23, 2015

Town & Country Resort and Convention Center | San Diego, CA

Place an Advertisement in the Program Guide & Event Directory  
Handed out to All Attendees On Site!!

Advertising Artwork Due: November 2014

PTK1524

Company Name: \_\_\_\_\_ Web site: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms  
Title: \_\_\_\_\_ Division: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Prov/Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Live Area Dimensions	(width x length)	Non-Exhibit/Sponsor Pricing	Exhibit/Sponsor Pricing
<b>BLACK AND WHITE</b>			
Full Page (trim size)	8.5" x 11"	<input type="checkbox"/> \$1,400	<input type="checkbox"/> \$700
Live area	8 x 10.5		
1/2 Page Horizontal	8.5" x 5.5"	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$550
Live area	8 x 5		
<b>COLOR PREMIUM</b>			
1/2 Page Horizontal	8.5" x 5.5"	<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$650
Live area	8 x 5		
Full Page (trim size)	8.5" x 11"	<input type="checkbox"/> \$1,800	<input type="checkbox"/> \$900
Inside Front Cover (trim size)	8.5" x 11"	<input type="checkbox"/> \$4,800	<input type="checkbox"/> \$2,400
Inside Back Cover (trim size)	8.5" x 11"	<input type="checkbox"/> \$4,800	<input type="checkbox"/> \$2,400
Outside Back Cover (trim size)	8.5" x 11"	<input type="checkbox"/> \$5,600	<input type="checkbox"/> \$2,800
Live area	8 x 10.5		

Note: Bleeds only accepted on cover advertisements.

**SPECIFICATIONS** Acceptable File Type: Adobe Acrobat "High Resolution" pdf.

-BEFORE creating the pdf make sure that all images are 300 dpi and use the CMYK Color Mode.

-All swatches need to be converted to CMYK before being exported to PDF.

-Make sure the embed all fonts option is selected.

-If you would like ads to bleed you MUST make the ad extend at least ¼ inch

-If you have ads that are to "bleed" off the page you MUST ALSO indicate this with **Crop Marks**.

**Payment Method & Terms**

☐ This contract is subject to the following terms and conditions:

1.) Full payment within 30 days of contract date.

2.) Once signed, it is agreed that this is a binding contract with a 100% cancellation fee.

☐ Enclosed is a check or money order payable to Cambridge Healthtech Institute drawn on an U.S. Bank in U.S. Currency.

☐ Charge to credit card (check one): ☐ Visa ☐ MasterCard ☐ American Express

Card Holders Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature required: I, (print name) \_\_\_\_\_, reviewed and agree to the payment terms stated above. I understand that this contract is legally binding between CHI and my company. I am authorized to approve the terms of this contract.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Please send questions or send electronic submissions to:

**AD for PEPTALK 2015 (company name)**

Attn: Elaine Eskedal

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