



**CARIBBEAN COMMUNITY THEATRE**  
**2013 – 2014 Season Program Booklet**

**ADVERTISING CONTRACT**

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Ad Size \_\_\_\_\_ Ad Rate \_\_\_\_\_

Total Due: \$ \_\_\_\_\_ Payment Enclosed: Amount: \$ \_\_\_\_\_ Check # \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_, 2013.

**AD RATES:**

<u>Size</u>	<u>Dimensions</u>	<u>Price</u>
( ) Back Cover (full page)	4.5" x 7.5"	\$550.00
( ) Inside Cover (front or back; full page )	4.5" x 7.5"	\$500.00
( ) Full Page (center - left or right)	4.5" x 7.5"	\$450.00
( ) Full Page (no specific location)	4.5" x 7.5"	\$400.00
( ) One-Half (1/2) Page (no specific location)	4.5" x 3.625"	\$250.00
( ) One-Quarter (1/4) Page (no specific location)	4.5" x 1.75"	\$175.00
( ) One-Eighth (1/8) Page (no specific location)	2.125" x 1.75"	\$125.00
( ) "Best Wishes" (without logo)	1.25" x 1.25"	\$ 50.00

Check here if ad is exactly the same as ad used in last season's program: \_\_\_\_\_

**ALL RATES ARE FOR CAMERA READY ARTWORK.**

**Please make checks payable to: Caribbean Community Theatre**  
(a USVI 501(c)(3) non-profit organization; EIN 66-0535808)

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**FOR CCT USE:**

Date Ad Received: \_\_\_\_\_, 2013.

Date Contract Received \_\_\_\_\_, 2013. Date Payment Received \_\_\_\_\_, 2013.

**CCT Theatre, Inc., d/b/a Caribbean Community Theatre**  
PO Box 25793 GBS, Christiansted, VI 00824  
Telephone: 340-778-1983; Fax: 692-5305