



Program Book Form

Yes, I would like to advertise in the *Bittersweet*[™] event Program Book

- One line Salutation \$50.00
 1/4 Page Ad (2 ³/₈ x 3 ³/₄) \$100.00
 1/2 Page Ad (4 ³/₄ x 3 ³/₄, horizontal) \$175.00
 Full Page Ad (4 ³/₄ x 7 ¹/₂) \$300.00

Total Contribution of \$_____.

Please make checks out to: The Autism Project of Rhode Island

Check Enclosed

OR

Please bill my: Visa AMEX MC

Account Number: _____ Expiration Date ___/___

Company Name _____

Billing Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

Fax _____

Authorized Signature _____ Date _____

Order taken by: _____

Please email camera ready ad in a jpeg format to mary@theautismproject.org.
Call Mary Farhoumand at 401-785-2666 with any questions.

Please Note: Deadline for Ad placement is February 25, 2008

Thank you for your generous support