



Bright Feats Advertising Contract Greater Orlando

Contact Name: _____ Date: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell No.: _____

E-mail Address: _____

Website: _____

Category in the Directory: _____

Publication Distribution & Due Dates: Orange, Seminole, Osceola, & Lake Counties
Ad rates apply per issue.

Summer/Fall Publication (Distributed April - Sept.): Due **March 15** _____

Winter/Spring Publication (Distributed Oct. - March): Due **Sept. 15** _____

Printed Advertisements:

| | | Summer/Fall | Winter/Spring |
|-------------------------|--------|-------------|---------------|
| Front Cover Sponsorship | \$3000 | <u>n/a</u> | <u>n/a</u> |
| Back Cover Full Page Ad | \$2750 | _____ | <u>n/a</u> |
| Full Page Ad | \$2500 | _____ | _____ |
| Half Page Ad | \$1500 | _____ | _____ |
| Quarter Page Ad | \$750 | _____ | _____ |
| Eighth Page Ad | \$350 | _____ | _____ |

A printed directory listing is included for no additional charge with the purchase of a print advertisement.

Print Only Directory Listing:

\$200 _____

Payment Information:

Subtotal: _____
Less Discounts: _____
Total Due: _____

Please select preferred method of payment from options below:

Check Check #: _____

Make checks payable to Bright Feats and mail to:
PO Box 161602, Altamonte Springs, FL 32716-1602.

Credit Card Debit Card Pay Pal ACH Bank Transfer

We'll email an invoice for easy electronic payment.

Signature: _____

Simple Life Connections, dba Bright Feats, reserves the right to refuse submitted Advertisements and Directory Listings for any reason at any time. If refused, the payment will be refunded within 30 days.

Simple Life Connections, LLC
Bright Feats Directory
PO Box 161602
Altamonte Springs, FL
32716-1602

Rori Becker 407-620-9355
Rori@BrightFeats.com
www.brightfeats.com

View our Media Kit:
www.BrightFeats.com/mediakit



Bright Feats Advertising Contract

Terms and Conditions

This contract is an agreement to place advertising in the Bright Feats Directory, owned and operated by Simple Life Connections, LLC. By signing this contract, the advertiser hereby agrees to the following terms.

Payments:

Advertisements in Bright Feats are to be paid in full by the indicated deadline dates. We will allow a 10 calendar day grace period after the deadline date for check payments to be received in the mail. Payments received after the deadline date and grace period are subject to an additional charge of 10% of the print advertisement.

If we have not received payment by the specified deadline date we reserve the right to delay the ad until the following publication.

Right of Refusal:

Simple Life Connections, dba Bright Feats, reserves the right to refuse submitted advertisements for any reason at any time. If an ad is refused the payment will be refunded within 30 days.

Ad and Graphic Submissions:

By signing this contract you are indicating that all submitted materials, including graphics, photographs, video or intellectual property, are owned by you and necessary licences to use any third party materials have been secured. You have releases signed by individuals included in photographs, video or other materials submitted.

We are happy to design a professional advertisement for you, graphic design fees apply, or you may submit your own ad graphic. Submitted ad graphics must fit Bright Feats ad dimensions and be supplied in CMYK at 300 dpi at 100% in a pdf, jpg, tif file. Corrections required for submitted artwork will be subject to a graphic design fee of \$65 per hour. We will notify advertiser of need for corrections prior to revisions being made.

Submitted ad graphics and cover photos may be used by Bright Feats in self promotional printed and electronic materials.

Advertiser is responsible for the quality and accuracy of any artwork provided and/or approved.

I have read and understand the terms of this contract and policy as stated above. I agree to be personally responsible for this debt and understand the terms and deadline dates. I verify I have full authorization for company payments.

Signature: _____

Date: _____

Company: _____

Address: _____

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