

Athletics Advertising

Order Form

Date: _____

Advertiser: _____

Address: _____

Contact Person: _____

Phone: _____ Fax: _____ Email: _____

Corporate Sponsorship Packages:

Scoreboard Package

Pucillo \$2,500 Biemesderfer Football \$3,000 Both \$5,000 \$ _____

Corporate Sponsor-

Football/Basketball \$4,500 \$ _____

Special Game Sponsor

Community Day & TKTG Sponsor \$3,000/event (# events____) \$ _____

Concession Advertising

Football

Basketball

Both

\$750

\$600

\$1,200

\$ _____

Banner Advertising:

Biemesderfer Stadium & Pucillo Gymnasium

(4-color, 4' x 6') \$3,000 \$ _____

Baseball (4-color, 6'x8') \$500(*new*) \$300(*renewal*) \$ _____

Program Ads:

	Football	Basketball	Both	Cost
Back Cover (full pg/4c)	<input type="checkbox"/> \$750	<input type="checkbox"/> \$500	<input type="checkbox"/> \$1,200	\$ _____
Front Inside (full pg/4c)	<input type="checkbox"/> \$650	<input type="checkbox"/> \$450	<input type="checkbox"/> \$1,000	\$ _____
Back Inside (full pg/4c)	<input type="checkbox"/> \$650	<input type="checkbox"/> \$450	<input type="checkbox"/> \$1,000	\$ _____
Center Spread (4c)	<input type="checkbox"/> \$600			\$ _____
Full Page	<input type="checkbox"/> \$450	<input type="checkbox"/> \$400	<input type="checkbox"/> \$775	\$ _____
1/2 Page	<input type="checkbox"/> \$350	<input type="checkbox"/> \$300	<input type="checkbox"/> \$600	\$ _____
1/4 Page	<input type="checkbox"/> \$250	<input type="checkbox"/> \$200	<input type="checkbox"/> \$400	\$ _____
1/8 Page	<input type="checkbox"/> \$200	<input type="checkbox"/> \$150	<input type="checkbox"/> \$300	\$ _____
Business Card	<input type="checkbox"/> \$150	<input type="checkbox"/> \$100	<input type="checkbox"/> \$200	\$ _____

Seasonal Cards:

Fall Winter Spring
 \$800 \$800 \$600 \$ _____

Total: \$ _____

Email PDF by **June 30** to: **diane.tothero@millersville.edu**

Camera ready ad enclosed Use ad from last year

Bill me (tear sheet required)

Check enclosed Amount: \$ _____ \$

(payable to: **Millersville University**)

Return this form along with required ad/logo to:

Deb Miller, Millersville University, University Communications & Marketing, P.O. Box 1002, Millersville, PA 15551-0302. Or fax form to: (717) 871-2009 and send artwork under separate cover.

Signature: _____

Title: _____ Date: _____

Student Programs

Order Form

Date: _____

Advertiser: _____

Address: _____

Contact Person: _____

Phone: _____ Fax: _____ Email: _____

Club de'Ville

\$400 per event x _____ # of events \$ _____

Movie Series

\$500 per weekend x _____ # of weekends \$ _____

The Arts @ Millersville

Theater Performances

\$250 per night x _____ (# of nights) \$ _____

\$350 Opening Night \$ _____

\$1,500 Entire Run \$ _____

\$2,000 Entire Run \$ _____

Total: \$ _____

Bill me

Check enclosed-Payable to: **Millersville University**

Return this form to: Deb Miller, Millersville University,
University Communications & Marketing, P.O. Box 1002,
Millersville, PA 17551-0302 or fax (717)871-2009.

Signature: _____

Name (print): _____

Title: _____

Date: _____

MILLERSVILLE
UNIVERSITY