



*Please* FILL OUT

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Contact Email: \_\_\_\_\_

-----

## SELECT PROGRAM AD SIZE

☐ \$150 - 1/8 Page

☐ \$300 1/4 Page

☐ \$500 - 1/2 Page

-----

Please attach your payment to this form  
and mail in provided return envelope.

Make checks out to "Leah Perry."

Please email your business logo to  
[leahperry1021@gmail.com](mailto:leahperry1021@gmail.com).