

Program Book Ad Space

- Full Page Ad (7.5H x 4.5W) \$250
- Half Page Ad (3.5H x 4.5W) \$150
- Business Card Ad (1.7H x 4.5W) \$50

All artwork (logos and/or photos) must be submitted via email to rcipolla@favarh.org. (COLOR or BW - JPEG format please)

Please complete ALL Information below:

Name or Business Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone (H): _____

Phone (Other): _____

Fax: _____

Email (requested): _____

Check Amount: _____

Credit Card: (please circle) MC / Visa / Discover
_____ Exp. _____ Security Code _____

Signature: (required) _____

RESERVE YOUR TICKETS NOW!
For additional information contact Ronelle Cipolla
860-693-6662 x116 or rcipolla@favarh.org

***FIRST-COME-FIRST-SERVED
FOR PRIORITY SEATING**

Mail payments to:
Favarh
225 Commerce Drive
Canton, CT 06019-1099

Program Book Ad Space

- Full Page Ad (7.5H x 4.5W) \$250
- Half Page Ad (3.5H x 4.5W) \$150
- Business Card Ad (1.7H x 4.5W) \$50

All artwork (logos and/or photos) must be submitted via email to rcipolla@favarh.org. (COLOR or BW - JPEG format please)

Please complete ALL Information below:

Name or Business Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone (H): _____

Phone (Other): _____

Fax: _____

Email (requested): _____

Check Amount: _____

Credit Card: (please circle) MC / Visa / Discover
_____ Exp. _____ Security Code _____

Signature: (required) _____

RESERVE YOUR TICKETS NOW!
For additional information contact Ronelle Cipolla
860-693-6662 x116 or rcipolla@favarh.org

***FIRST-COME-FIRST-SERVED
FOR PRIORITY SEATING**

Mail payments to:
Favarh
225 Commerce Drive
Canton, CT 06019-1099

Program Book Ad Space

- Full Page Ad (7.5H x 4.5W) \$250
- Half Page Ad (3.5H x 4.5W) \$150
- Business Card Ad (1.7H x 4.5W) \$50

All artwork (logos and/or photos) must be submitted via email to rcipolla@favarh.org. (COLOR or BW - JPEG format please)

Please complete ALL Information below:

Name or Business Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone (H): _____

Phone (Other): _____

Fax: _____

Email (requested): _____

Check Amount: _____

Credit Card: (please circle) MC / Visa / Discover
_____ Exp. _____ Security Code _____

Signature: (required) _____

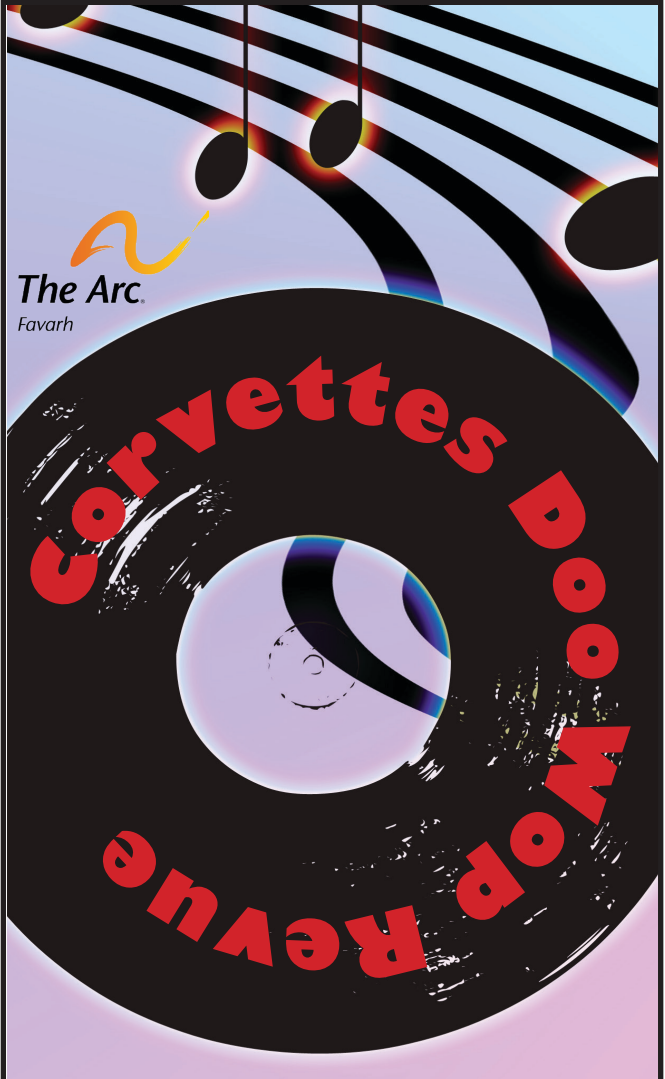
RESERVE YOUR TICKETS NOW!
For additional information contact Ronelle Cipolla
860-693-6662 x116 or rcipolla@favarh.org

***FIRST-COME-FIRST-SERVED
FOR PRIORITY SEATING**

Mail payments to:
Favarh
225 Commerce Drive
Canton, CT 06019-1099

Favarh's 60th Anniversary Program Ad Book!

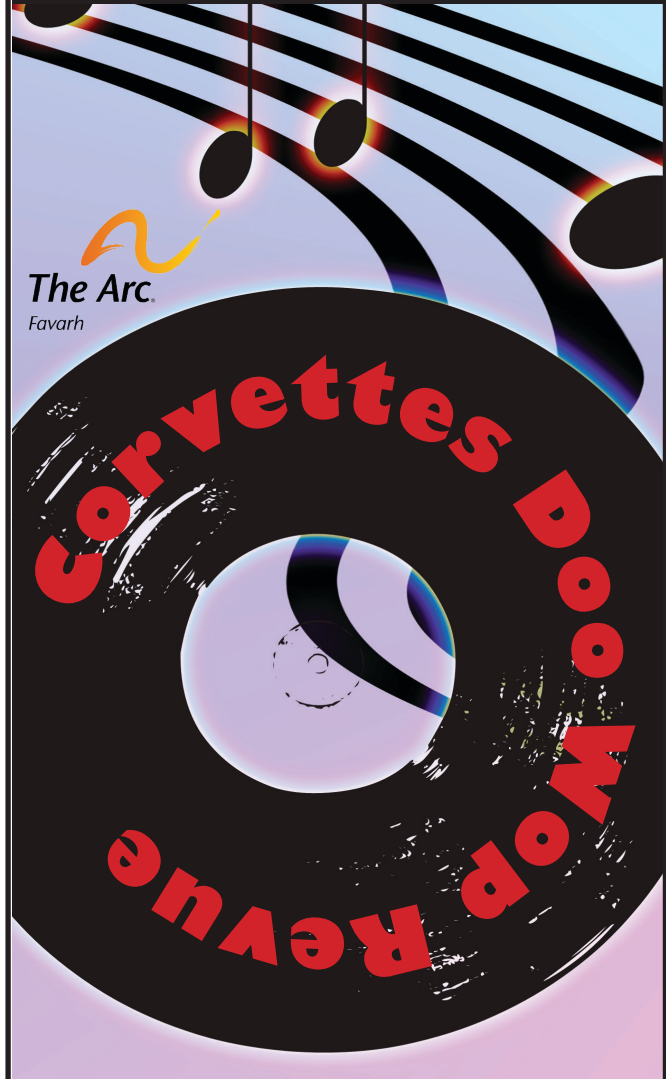
We have a special place just for you!
Advertise in Favarh's 2018 Program!



NOVEMBER 16, 2018

Favarh's 60th Anniversary Program Ad Book!

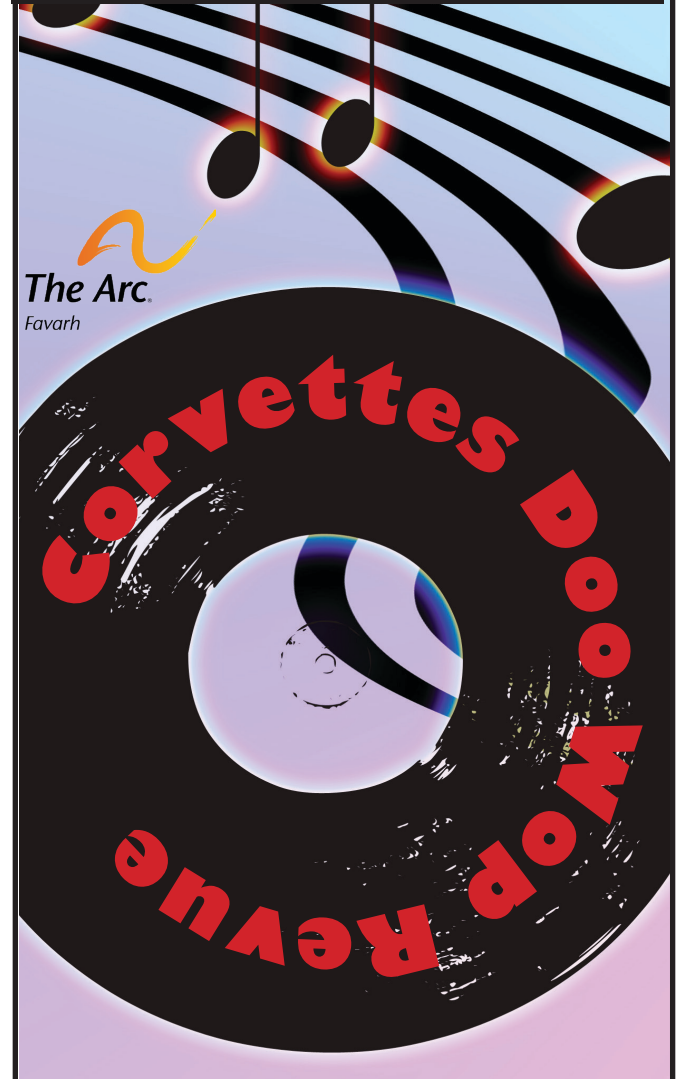
We have a special place just for you!
Advertise in Favarh's 2018 Program!



NOVEMBER 16, 2018

Favarh's 60th Anniversary Program Ad Book!

We have a special place just for you!
Advertise in Favarh's 2018 Program!



NOVEMBER 16, 2018