

## ADVERTISING RATES AND DISCOUNTS

### Display Rates:

<u>General Display Rates (per edition)</u>		<u>Special Placement Rates (per edition)</u>			
Full Page	\$900		Full	Half	Quarter
Half Page	\$650	Front Inside Cover	\$1,000	\$750	\$600
Quarter Page	\$500	Back Cover	\$1,000		
		Back Inside Cover	\$1,000	\$750	\$600
		Special Page Request	\$1,000	\$750	\$600
		Center Spread	\$1,600		

**Credit Card Fee:** 3% charge will be added for processing credit card transactions.

### Discounts:

<u>Quantity Discount</u>			<u>IMS Member Discount</u>			<u>Vendor Discount</u>		
Full Year	Full Page	10%	Individual	Purchases	10%	Individual	Purchases	5%
Full Year	Half Page	5%	Full Year	Full Page	15%	Full Year	Full Page	13%
			Full Year	Half Page	10%	Full Year	Half Page	7%

Call for availability of special placements.

Editor reserves the right to amend, cancel or not offer any discount at any time.

Discounts will not be offered to vendors if they are offered other promotional offers.

## DEADLINES AND CANCELLATIONS

Contract Deadline: 5<sup>th</sup> day of the month preceding the month of the publication.  
i.e. December 5<sup>th</sup> for January edition of the Bulletin, and always depending on availability.

Copy Deadline: 15<sup>th</sup> day of the month preceding the month of the publication  
i.e. December 15<sup>th</sup> for January edition of the Bulletin.

Cancellation: Cancellation will only be accepted with written notice by the first day of the month preceding the publication month. The publisher reserves the right to repeat the last ad on time contracts, if new copy or cancellation notice is not received by deadline date.

## ADVERTISING SPECS

### Ad Dimensions and Formatting:

Full Page	7.5"w x 9.75"h	Resolution	300 dpi
Half Page (horizontal)	7.5"w x 4.75"h	Formats	pdf, esp, jpg, tif
Half Page (vertical)	3.5"w x 9.75"h		
Quarter Page	3.5"w x 4.75"h		
Full Bleed ads:	8.625"w x 11.125"h		

Files must be embedded with all necessary graphics and fonts.

Any file conversions, graphic treatments and additional proofs will be charged in addition to the rates quoted previously.

Ad copy must be the size listed above and emailed to the editor,  
mperrill@indymedicalsociety.org, by the below mentioned deadline.

Placement of ads, except for paid for prime spots, is at the discretion of the editor.

Online versions will be available for up to 3 years. Links provided by advertisers will be embedded into advertisements for online versions when sent with ads by their deadline.

Editor reserves the right to promote the Bulletin on social media platforms managed by the society.

All ads are net; advertising agency placement discounts do not apply.

Requests for special positions (other than prime spots) may incur additional charges.

*Indianapolis Medical Society Approval Policy: All advertising must be approved by the publisher. IMS reserves the right to refuse any advertisement. Advertiser and his agency will indemnify, defend and hold harmless the publisher from any claim and all loss, expense or liability arising out of the publication of any advertising copy. Publication of advertising by the IMS does not imply endorsement or approval. The liability of the publisher for any error, omission, or delay, for which it may be held legally responsible, shall in no event exceed the cost of the space paid for and occupied by such individual advertisement. Invoices are due upon receipt. Invoices that remain unpaid for 30 days shall accrue interest at a rate of 18% per annum. Should the IMS be forced to retain attorneys to collect all or any portion, of our invoices, such fees and court costs that may be reasonable and necessary, as well as any accrued interest charge, will be paid by the advertiser or their agent. The Advertiser and the Agent/Agency will be held responsible for payment.*

*Board Certification Policy: IMS publishes board certifications approved by the American Board of Medical Specialties, American Osteopathic Association, and Royal College of Surgeons. Physician members wishing to designate an area of special interest in which their boards are not ABMS-, AOA-, or RCS-approved may use the following wording: "Specializing in".*

# BULLETIN Advertising Contract

## ADVERTISING CONTRACT

**Return To:**

Morgan Perrill  
Executive Vice President  
Indianapolis Medical Society  
125 W. Market Street, Suite 300  
Indianapolis, IN 46204  
[mperrill@indymedicalsociety.org](mailto:mperrill@indymedicalsociety.org)

**Advertiser and/or Agency:**

Advertiser/Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

*\*Proof of publication will be mailed to this contact unless otherwise directed.*

Website: \_\_\_\_\_

**Ad Display Type:** Full Page \_\_\_\_ Half Page(h) \_\_\_\_ Half Page(v) \_\_\_\_ Quarter Page \_\_\_\_**Special Placement Request: (if any)**

Front Inside Cover \_\_\_\_\_

Back Outside Cover \_\_\_\_\_

Back Inside Cover \_\_\_\_\_

Center Spread \_\_\_\_\_

Specific Page \_\_\_\_\_

N/A \_\_\_\_\_

Special Request Instructions: \_\_\_\_\_

\_\_\_\_\_

\*Or attach page with requests or IO.

**Advertisement to Run in the following months:**

Jan \_\_\_\_\_ April \_\_\_\_\_ July \_\_\_\_\_ Oct \_\_\_\_\_

Feb \_\_\_\_\_ May \_\_\_\_\_ Aug \_\_\_\_\_ Nov \_\_\_\_\_

Mar \_\_\_\_\_ June \_\_\_\_\_ Sept \_\_\_\_\_ Dec \_\_\_\_\_

# BULLETIN Advertising Contract

## Discount:

Apply for the following discount: IMS Member \_\_\_\_\_ IMS Vendor \_\_\_\_\_

**Billing Instructions:** please select invoice or charge (credit card) from below.

Please Invoice \_\_\_\_\_ (initial)  
*Terms are net 30 from date of the invoice*

Please Charge \_\_\_\_\_ (initial)  
*3% additional charge will be added*

\_\_\_\_\_ Same as advertiser information.

Cardholders Name \_\_\_\_\_

\_\_\_\_\_ Use information below for invoice.

Card Number \_\_\_\_\_

Contact Name \_\_\_\_\_

Visa \_\_\_ MasterCard \_\_\_ AMEX \_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV Code \_\_\_\_\_

Signature \_\_\_\_\_

Please print, sign, and date the contract below. By signing you agree to all of the terms and specifications listed in the Bulletin advertising rates and specs included in this media kit.

Name(print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*Please return to Morgan Perrill. Confirmation of discount and final price will be determined by the editor, Morgan Perrill, and the contract will be returned to you.*

*To be completed by the editor and returned:*

Approved Discount: \_\_\_\_\_ % Monthly Price: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_