

2024 Program Ad Order Form

Please turn in your ad instructions by Friday, January 11th or turn in your final PDF by Friday, January 18th by 5 p.m.

Company Name: _____

Company Address: _____

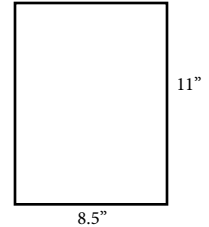
Contact Name & Position: _____

Email Address: _____ Phone Number: _____

Yes, I will support the 15th Annual Tour of Kitchens & Tropical Living by donating for a program ad.

FULL PAGE AD
\$500

- FULL page, full-color, FULL bleed available if desired
- Trim Size: 8.5 x 11 inches (2550 x 3300 pixels)
- Bleed Size: 8.75 x 11.25 (0.125" on each size)
- Image resolution must be 300 dpi or higher
- Please convert artwork to PDF or JPG
(No png, doc, ppt, indd, ai, psd or other file types)



HALF PAGE AD
\$300

- HALF-page, full-color, NO bleed
- Trim Size: 8.5" wide x 5.5" deep (2550 x 1650 pixels)
- Image resolution must be 300 dpi or higher
- Please convert artwork to PDF or JPG
(No png, doc, ppt, indd, ai, psd or other file types)



Payment Method

I will pay by check made payable to the Coral Gables Community Foundation. I will mail payment to Coral Gables Community Foundation, 1825 Ponce de Leon Blvd., PMB#447, Coral Gables, FL 33134-4418. Check Number _____

I will pay by card online (https://cgcf.fcsuite.com/erp/donate/list/event?event_date_id=2023).

I will pay by card – please see below. AMOUNT \$ _____

Card number # _____ Exp. Date (MM/YYYY) _____

Security Code (CVV) _____ Billing Zip Code _____

Card Billing Address _____

PAYMENT AUTHORIZATION AND AGREEMENT

Full Name _____

Signature _____

Date _____



bit.ly/tok24pay