



Program Advertiser and Business Donor Form

PLEASE PRINT CLEARLY

Name of Business _____

Contact Name _____

Address _____

City/State/Zip _____ Telephone _____

Email: _____

Standard Advertisements: *check one* (cost per concert)

- full page.....\$100
- half page\$75
- quarter page.....\$60
- business card size.....\$45

Indicate concert(s) to advertise in:

(see website www.vmschorus.org or current concert program for concert dates or info)

Payment: (cash or check only)

Amount enclosed \$ _____ (make checks payable to "Voices of Musica Sacra")

Date: _____ Cash _____ Check # _____

Artwork: (can be submitted in color or B&W, but are printed in B&W)

Send the image electronically to info@vmschorus.org (JPEG or PDF files preferred).

OR

Securely attach (clip) hard copies of your business card or camera-ready artwork to this form and mail to:

*Voices of Musica Sacra Chorus
c/o 1940 Rainier Drive
Martinez, CA 94553*

**ALL AD SUBMISSIONS MUST BE RECEIVED NO LATER THAN 12 CALENDAR DAYS
PRIOR TO THE SELECTED CONCERT TO BE INCLUDED IN THE PROGRAM.**

Thank you for supporting Voices of Musica Sacra!

(A tax exempt, California Non-Profit Corporation, Tax I.D. No. 68-0414813)