



OHIO VETERINARY MEDICAL ASSOCIATION

# 2017 ADVERTISING AGREEMENT

Online-Only Classified Ads

## ADVERTISER INFORMATION

Advertising Company \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Main Contact \_\_\_\_\_ Member Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

## ONLINE ADVERTISEMENT REQUEST

### OVMA Member: \$1 per word for 2 months

Ad duration:

- 2 months (default)
- Other: \_\_\_\_\_ months (Please specify in increments of 2 months)
- Run continuously until notified

### Non-Member: \$2 per word for 2 months

Ad duration:

- 2 months (default)
- Other: \_\_\_\_\_ months (Please specify in increments of 2 months)
- Run continuously until notified

## CLASSIFIED ADVERTISEMENT TEXT

Please type or print clearly using dark ink; use an additional page if needed. If you would like to use a specific title/headline, please denote it below; otherwise, we will write one for you based on the content. Be sure to include your preferred contact information.

Ad Type:  Associate Veterinarian  Relief Veterinarian  Faculty  Technician/Staff  For Sale  Other \_\_\_\_\_

Headline (optional; is not included in word count): \_\_\_\_\_

Text: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CLASSIFIED ADVERTISEMENT TERMS

- Advertising requests may also be submitted online at [www.ohiovma.org/advertising](http://www.ohiovma.org/advertising). You need not complete a paper form if you submit online.
- All classified advertising is subject to OVMA review and approval prior to placement. OVMA reserves the right to modify your submission if required for readability.
- Ads will be posted within two business days unless otherwise specified.
- Please be aware that there may be discrepancies across different word count tools. OVMA uses Microsoft Word to obtain word counts.
- The above advertising costs include placement of your ad in the OVMA's online classified section ONLY; they will not be printed in *The Observer*. If you would like your ad to be printed as well, please use the print/online advertising agreement instead.

## PAYMENT INFORMATION

Please send me an invoice. (Option available to OVMA Members only.)

Please charge the following credit card:  Visa  Mastercard  Discover  American Express

Card No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder Name \_\_\_\_\_ CVV \_\_\_\_\_

Signature \_\_\_\_\_ Total amount due: \$ \_\_\_\_\_

Please do not include credit card information if submitting this form by email. To ensure security, this information should only be sent via regular mail, fax, or over the phone.

**PLEASE RETURN  
COMPLETED FORM:**

**By mail:** OVMA, 1472 Manning Pkwy, Powell, Ohio 43065  
**By fax:** 614.436.1301 **By e-mail:** [ohiovma@ohiovma.org](mailto:ohiovma@ohiovma.org)

**Questions?** Call us at 800.662.6862  
or e-mail [ohiovma@ohiovma.org](mailto:ohiovma@ohiovma.org)