



# STOREfronts Quarterly Advertising Reservation

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

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Rates

	1 Issue	2 Issues	3 Issues	4 Issues
1 Inch Banner Front Cover	\$1,750	\$1,750	\$1,750	\$1,650
Back Cover	\$1,500	\$1,500	\$1,500	\$1,400
Full Page	\$900	\$800	\$800	\$700
Half Page	\$500	\$400	\$400	\$300

Issue	Published	Ad Copy Deadline
Q1	February	January 31
Q2	May	April 30
Q3	August	July 31
Q4	November	October 31

Please submit your Advertisement in PDF format to [alison@nyacs.org](mailto:alison@nyacs.org)  
 Full Page: 8½ x 11 • Half Page: 8½ x 5½

Select Ad Type	Select Issue(s)	Amount Due
<input type="checkbox"/> 1 Inch Banner Front Cover	<input checked="" type="checkbox"/> Q1	# of Issues _____
<input type="checkbox"/> Back Cover	<input type="checkbox"/> Q2	x Rate _____
<input type="checkbox"/> Full Page	<input type="checkbox"/> Q3	
<input type="checkbox"/> Half Page	<input type="checkbox"/> Q4	TOTAL: _____

**Payment:**  Check #: \_\_\_\_\_ Payable to New York Association of Convenience Stores

Visa       MasterCard       American Express

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Card \_\_\_\_\_ Billing Address \_\_\_\_\_

**Submit ad, form, and payment to:**

**NYACS • 130 Washington Ave, 3rd Floor • Albany NY 12210**  
**[alison@nyacs.org](mailto:alison@nyacs.org) • 518-432-1400**