



## GALA ADVERTISING FORM

### Advertiser Information

Company Name: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

TMS Parent?  YES  NO (If YES, please indicate child's name and room number.)

Child's Name: \_\_\_\_\_ Room Number: \_\_\_\_\_

### Advertisement Information

Full Page Ad - **\$250** (5.5" width x 8.5" height with 1/4" bleed added to the dimensions)

Method of Payment:  Cheque (payable to TMS)  VISA  MasterCard

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

\_\_\_\_\_  
Advertiser's Signature

\_\_\_\_\_  
Date

### IMPORTANT – Please see below for information on sending in your ad:

- Please email final artwork to [gala@tmsschool.ca](mailto:gala@tmsschool.ca)
- **Format:** Finalized full colour artwork should be sent in either JPEG or PDF format.
- **Artwork size:** 5.5" width x 8.5" height.
- Please ensure Advertiser and Advertisement Information section is completed

**\*Please submit this form and payment to the TMS Main Office by March 29<sup>th</sup>, 2023.**