

SHOW PROGRAM ADVERTISING CONTRACT

Company Name _____ Your Name _____

Address _____

City _____ State _____ Zip _____

Telephone (____) _____ Fax (____) _____

Date of Show: _____ Venue: _____

.....
Full page black & white ad in the Computer Fair Show Program: \$ _____
(\$100 – Exhibitors / \$200 – Non-Exhibitors)

Submit Advertising Contract to: nancy@westcoastexpos.com

Submit Art Work to: bob@westcoastexpos.com

.....
___ Make check payable to West Coast Expos, Inc. or use credit card:

___ Visa ___ MC ___ DISCOVER ___ AMEX

Account Number _____

Expiration Date _____

Printed name as it appears on card _____

Title _____

REQUIRED: Credit Card billing address street number only or PO Box number
only: _____ Billing Address Zip Code _____

AUTHORIZED SIGNATURE _____

Office Information Only

___ Pick-Up Same Ad (Confirm Booth Numbers)

___ Make Changes to Existing Ad

___ Sending New Ad

___ Production to Call Advertiser

West Coast Expos, Inc., 195 San Pedro Ave., Suite A
Morgan Hill, California 95037
Office: 408-465-2300 Fax: 408-465-2700