

2022 Advertising Options & Order Form

Display Advertising

Name on Card:

- The Virginia Voice is the UVCA's quarterly newsletter. It is distributed electronically to over 1000 member & non-member addresses twice, then posted to the web site for continued access.
- Display Ads may be full color, black & white or anything in between. No bleeds.
- Email display ad artwork to iconnolly@virginiachiropractic.org. PDF, JPEG or Word, 1 ad per file. Artwork must be received by

, ,	accompanied, or preceded by completed order		. Althore must be received by
Ad Size 1/8 Pg (3.5x2.25") 1/4 Pg (3.5x4.75")	that corresponds to your ad size & project pro	Non-Member Pricing □ \$83 per or □ \$332 \$270 □ \$123 per or □ \$492 \$415 □ \$193 per or □ \$772 \$646	5 for 4 consecutive 6 for 4 consecutive
Please check the is Issue Date Winter 2021-22 Spring 2022 Summer 2022 Autumn 2022 Winter 2022-23	Insertion Order, Artwork, Payment Due January 15, 2022 April 1 July 1 October 1 January 5, 2023		
 Classified Advertising Listings appear on UVCA's web site for 3 months; in quarterly blast to members & non-members, quarterly VCAdoctalk post, quarterly newsletter; are distributed at conventions & in response to inquiries. Email classified ad text to UnifiedVCA-Elaine@comcast.net. Max 65 words. Text must be received by published deadline, accompanied or preceded by completed order form & payment. 			
Please check box that corresponds to your membership stands Discounted Member Pricing DC Members, 3 months: 1st listing FREE; 2nd listing free; add'l listings \$50 emplier Member, 3 months: \$50 per listing Supplier Member, 12 months: \$200 \$175		Non-Member Pricing	
Online Supporters • Your company logo, linked to your web site, rotates in the lower right-hand corner of the web site. • Email logo art and desired web link to UnifiedVCA-Elaine@comcast.net. MEMBERS ONLY □ 6 months: \$500 OR □ 12 months: \$750			
ORDER & PAYMENT FORM			
Name: Co.:			
Street:	Ste:	City:	State: Zip:
Phone:	Fax: E-	nail:	
☐ Unified VCA DC Member	☐ Unified VCA Supplier Member ☐ Non-Me	ember Send Me Member	rship Info.
Enclosed: \$	_ via □ Check to Virginia Chiropractic Associa	tion OR Charge to □ Visa	a □ MC □ Discover □ AMEX
Card #:		Exp.:	Auth. Code:
Rilling Address			

Please complete and mail to the VCA, POB 15, Afton, VA 22920; fax to 540-932-3101; or e-mail jconnolly@virginiachiropractic.org. Questions? Call 540-932-3100. Thank you for your support!

Sig.:_

Date: