



PITTSBURGH CONCERT CHORALE

9800 McKnight Road, Suite 210-B
Pittsburgh, PA 15237-6004
Ph. 412.635.7654 | Fax 412.635.9123
Email: office@PCCsing.org | www.PCCsing.org

Program Advertisement Form • 2019-2020 Season

DEADLINE FOR AD SUBMISSIONS: 10/15/2019

STEP 1: CONTACT INFORMATION (PLEASE PRINT)

Name of Advertiser: _____
Address: _____ ZIP: _____
Phone: _____ E-mail Address: _____
Authorized by (Name): _____ FAX: _____
Signature: _____
Contact person for questions: _____ Phone: _____

STEP 2: AD SELECTION

- ☐ This is a new ad (see size requirements below and check your preference)
- ☐ Please reprint my ad from last year
- ☐ Please repeat my ad size only (I will supply new artwork/ad copy)
- ☐ Please change my ad size-check your preference below (I will supply new artwork/ad copy):
- | | | | | |
|-------------|--|-------|---|-------|
| Size of ad: | <input type="checkbox"/> Full Page (5x8) | \$300 | <input type="checkbox"/> Back Cover (8.5x5.5) | \$660 |
| | <input type="checkbox"/> Half Page (5x3.75) | \$180 | <input type="checkbox"/> Inside Front Cover (8.5x5.5) | \$600 |
| | <input type="checkbox"/> Quarter Page Horizontal (5x1.75) | \$120 | <input type="checkbox"/> Inside Back Cover (8.5x5.5) | \$600 |
| | <input type="checkbox"/> Quarter Page Vertical (2.25x3.75) | \$120 | (Cover pages are currently unavailable for purchase) | |

Format: Please send your ad in one of the following formats:

1. High-resolution PDF
2. High-resolution TIFF or JPEG (saved at 300 dpi)
3. Do not scan a document to create a PDF file. Please send us the paper document and we will scan it for you.

We request that every effort be made to send your advertisement to us digitally. If you cannot, please call us so we can make accommodations. (We can scan in your camera-ready art if necessary.) Special arrangements or submissions not in the required format may require a nominal fee. All ads will be printed grayscale.

- ☐ My ad will be sent electronically to office@PCCsing.org
- ☐ Will need special arrangements. (I will call the PCC office, 412.635.7654, to make arrangements within a week.)

STEP 3: PAYMENT—Please mail this completed form with your payment information to the address above.

- ☐ Check for: \$ _____. Please make check payable to the Pittsburgh Concert Choral.
- ☐ Credit Card Number: _____ Expiration Date (MM/YYYY): _____ Card Security Code: _____
Name as it appears on card: _____
Signature: _____
- ☐ Will pay online at <https://donorbox.org/pcc-program-ads>
- PCC Contact Name: _____