

**BLIND SERVICE ASSOCIATION
97TH ANNIVERSARY CELEBRATION
NOVEMBER 6, 2021
PROGRAM BOOK ORDER FORM**

Individual/Business Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home or Cell Phone: _____ Business Phone: _____

Fax: _____ E-Mail: _____



All announcements or ads will be produced in black and white or color. Please make your selection below:

___ Eighth of a Page (4¼" x 2¾").....	\$100.00	___ Inside Front Cover.....	\$1000.00
___ Quarter Page (4¼" x 5½").....	\$200.00	___ Inside Back Cover.....	\$1000.00
___ Half Page (8½" x 5½").....	\$400.00	___ Back Cover.....	\$1500.00
___ Full Page (8½" x 11").....	\$750.00	___ Best Wishes Page on 97 th Anniversary (guarantees your name will be listed on this page)	\$25.00 or more

ALL ANNOUNCEMENTS OR ADS MUST BE RECEIVED BY SEPTEMBER 20TH

___ Enclosed is my check or money order. Or purchase on-line at blindserviceassociation.org/donate.php

___ Please charge my ___ Visa ___ MasterCard ___ Discover ___ American Express

Card Number _____ Expiration _____ Code _____

___ Enclosed is my announcement or ad. Circle one: Business Card, Logo, Camera Ready Art, Message

___ I have emailed my announcement or ad (.jpeg or .pdf to info@blindserviceassociation.org)

___ Save the paper and postage, I do not need a receipt. _____ I prefer my receipt by e-mail.

**I am unable to provide an announcement or ad but would like to contribute \$ _____ to
Blind Service Association's October 11, 2021
97th Anniversary Celebration.**

Please return to:

**Blind Service Association • 17 N. State Street, Suite 1050 • Chicago, Illinois 60602
Phone (312) 236-0808 • Fax (312) 236-8679 • info@blindserviceassociation.org**