



*Program Advertisement
Registration Form*

419 Fieldpond Drive
Kingsport, TN 37664

Company Name: _____

Contact Person: _____

Street or Mailing Address: _____

City, State and Zip: _____

Phone # and extension: _____

Email Address: _____

Please enclose ad copy. Please make copy photo or camera ready. If assistance is needed to complete the ad, please let us know. All ads are printed in gray scale or black and white.

Ad copy to be returned: _____ Yes _____ No

SIZE OF AD DESIRED:

FRONT COVER: \$3,000 _____ FULL PAGE: \$200 _____

BACK COVER: \$2,000 _____ HALF PAGE: \$110 _____

INSIDE COVER: \$ 500 _____ FOURTH PAGE: \$ 60 _____

FACING PAGE: \$ 400 _____ BUSINESS CARD: \$ 45 _____

Please consider the Caitlyn Elliott Duncan Memorial Fund as well. Please refer to the Scholarship section for more information and a registration form. Program ad and Scholarship monies can be combined and submitted on one check when mailed together.

*Thank you for helping support
Intercity Ballet Theatre*

Intercity contact person _____

Phone # _____