

EMA

Entrepreneurial
Mothers Association

Newsletter Advertising Contract

Name _____

Business Name _____

Work Number _____ Cell Number _____

Email Address _____

Address _____

Please check the advertising option you are paying for.

_____ 1 month (\$10)

_____ 3 months (\$24)

_____ 6 months (\$45)

Amount Paid _____ Check Number _____

Month Advertising Starts _____ Month Advertising Ends _____

Date Money Received _____

Money Received By _____