

<p><b>Half Page Imprint Area— approximately 4" x 4 ½"</b></p>
<p><b>Quarter Page Imprint Area— Approximately 4 ½" x 2"</b></p>
<p>If our designer is creating your ad, please <b>email all pertinent text</b> to <a href="mailto:communications@thehcpac.org">communications@thehcpac.org</a>. Please <b>attach any logos or images</b> to be used and specify any preferences regarding graphics or clip art. Otherwise, please <b>email the completed ad</b> to us at the same address or <b>provide the desired ad</b> (ex: business card) <b>with this form.</b></p>

**Full Page Imprint Area — approximately 8" x 4 ½"**

## BUSINESS AD SUBMISSION FORM

**HARRISBURG CHRISTIAN PERFORMING ARTS CENTER**  
1000 S. Eisenhower Blvd., Middletown, PA 17057



Please fill out the following information, attach ad, if you are not emailing desired ad and logo, and return with payment to Harrisburg Christian Performing Arts Center **before March 18, 2017**, for inclusion in Passion Play 2017, *Hope Has Come*.

Business or Individual Name: \_\_\_\_\_

Business Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Cast Member Securing Ad (if applicable): \_\_\_\_\_

¼ Page	½ Page	Full Page
\$40	\$70	\$100

*Please make checks payable to "HCPAC."*

### CREDIT CARD AUTHORIZATION

Credit Card Type: \_\_\_\_\_ Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Three Digit Security Code: \_\_\_\_\_

Full Name of Cardholder: \_\_\_\_\_

I authorize HCPAC to process a charge on my account in the amount of \$\_\_\_\_\_.

Signature of Cardholder: \_\_\_\_\_

Date: \_\_\_\_\_