



CHARTIERS VALLEY HIGH SCHOOL FOOTBALL BOOSTERS

2010 FAMILY AND FRIENDS AD SUBMISSION FORM

1. **Select Ad Size**
2. **Attach Ad copy or indicate exact wording in the space provided below** (ads may be submitted via email as a PDF, EPS, JPEG, TIF attachment)
3. **Include any additional instructions**
4. **Complete contact information**
5. **Indicate organization**
6. **Make check payable to: CVHSFB. PAYMENT FOR AD MUST BE RECEIVED AT THE TIME AD HAS BEEN SUBMITTED.**

¼ Page	\$ 45	_____
½ Page	\$ 70	_____
Full Page	\$100	_____
SENIORS ONLY – Name That Baby:	\$0	_____ (Please include baby picture.)

Subscriber Name: _____

Address: _____

Phone: _____

Student's Name: _____ Grade: _____

Please indicate organization. Photo will be included unless otherwise requested.

_____ Football _____ Band _____ Majorette _____ Charvalette _____ Cheerleader

_____ Ad Attached _____ Ad Written Below _____ Additional Instructions included

Send completed request to:
 Alana Rose, 411 Bluefield Drive, Oakdale, PA 15071
Any questions, please call 412-523-5900 or email – arose@aroseassociates.com.
ADDITIONAL FORMS MAY BE DOWNLOADED FROM WWW.CVCOLTS.COM.