AHRMM ADVERTISING CONTRACT AND APPLICATION

Select your preferred run date(s) below and return this application to mkravenas@aha.org. For email/website advertising, send JPG, PNG, or static GIF files only. Include web address to link your ad directly to your website. Digital materials are due five business days before publish date. All email/website advertising artwork should be submitted to mkravenas@aha.org. All advertising is assigned on a first-come, first-served basis.

DIGITAL



eNEWS, AHRMM NOW AND CAREER CENTER JOB ALERT

LOCATIO	SPECIFICATIONS	RATES	PREFERRED DATE(S)
Top (2 available	300w x 250h pixels, 25KB (max)	\$650/ad, \$1,100 both top spots	
Bottom (2 available	300w x 250h pixels, 25KB (max)	\$400/ad, \$750 both bottom spots	



WEBSITE

LOCATION	SPECIFICATIONS	RATES	PREFERRED DATE(S)
Bottom (3 available)	500w x 300h pixels, 30KB (max)	\$2,000/ad space Purchase all 3 ad spaces \$5,000/month \$12,500/3 months \$20,000/6 months	

AHRMM CONNECT



LOCATION	SPECIFICATIONS	RATES	PREFERRED DATE(S)
Home Right	300w x 250h pixels, 30KB (max)	\$1,800/month \$9,180/6 months \$16,200/12 months	
Home Bottom	962w x 125h pixels, 40KB (max)	\$1,500/month \$7,650/6 months \$13,500/12 months	
Interior Right	300w x 250h pixels, 30KB (max)	\$1,250/month \$6,375/6 months \$11,250/12 months	





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DATA

LIST RENTAL

AUDIENCE	CIRCULATION	RATE	PREFERRED DATE(S)
All Members	4,200	\$2,500	
Providers	3,450	\$2,250	
Executives	125	\$1,750	



CONTENT MARKETING

CUSTOM eBLAST

AUDIENCE	CIRCULATION	RATE	PREFERRED DATE(S)
All Members	4,200	\$3,000	
Providers	3,450	\$2,500	
Executives	125	\$1,850	





SPONSORED WHITE PAPER

AUDIENCE	SPECIFICATIONS	RATE	PREFERRED DATE(S)
AHRMM Members and Prospects	White Paper (2,400 words max), 250-word abstract (Word doc.) logo (.eps or high res .jpg), one outbound link	\$5,000	

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To place an Insertion Order, complete this contract and fax it with credit card payment to (312) 422-4573 or mail with check payment to: AHRMM, P.O. Box 75315, Chicago, IL 60675-3715.

CONTACT INFORMATION				
Contact Name				
Title				
Address				
City	State	Zip		
Phone	Fax			
Email	Website			
PAYMENT INFORMATION				
Total Due:				
☐ Check enclosed (payable to AHRMM an	d send to P.O. Box 75315, Chicago, IL 60675-3	715)		
☐ Credit Card (please contact mkravenas@	Pahalorg for payment instructions)			
GUIDELINES				
to your company upon receipt of application are benefits will be given without full payment. 3. Cancellation: Your company may not cancel the 4. Deadlines: Benefits of AHRMM Advertising are 5. Assignment: Ad spaces will be assigned upon refirst-served basis. 6. Transfer of Benefits: Benefits are not transferable. Limited Liability: The liability of AHRMM for any any cash payment. AHRMM will not, in any eve 8. Change, Cancellation, or Substitution of Benefit opportunity or benefit at any time. 9. Ad Agency Submissions: All prices are net. Ad at The agreement and this document represent the	nission of this AHRMM Advertising Contract and Applicated Payment. Reservations will not be held without payment at AHRMM Advertising Contract after acceptance by AHR subject to adherence to submission deadlines. receipt of full payment with application. Spaces are limited.	ment. No sponsorship or advertising RMM. iited and are assigned on a first-come, onsible shall not exceed the cost of not limited to, lost income, or profits. ostitute any AHRMM Advertising		
to all terms and conditions by signing the AHRMN	M Advertising Contract and Application.	Tizod to do so dirid agrees to be bound		
Name (please print)	Title			
Authorized Signature	Date			





For more details on sponsorship and advertising opportunities, visit **www.ahrmm.org/advertise**.