ADVERTISE WITH THE 32nd ANNUAL CONVENTION OF THE

**LOS ANGELES COUNTY PSYCHOLOGICAL ASSOCIATION**

## Saturday, October 17, 2020 Virtually via Zoom

|  |  |  |
| --- | --- | --- |
| Convention Display Advertising  Dates, Rates, & Sizes  (Please check box below and circle amount.)  Huge advertising savings for 2020 | Brochure  **AND**  Convention Day Program  **Deadline**  **6/15/20** | Convention Day Program  **ONLY**  **Deadline**  **9/19/20** |
| ❑ Full Page Color (7.5” W x 9.25” H) (*Does not include back cover)* | $1350 | $1000 |
| ❑ Half Page Color (7.5” W x 4.5” H) | $ 675 | $ 375 |
| ❑ Quarter Page Color (3.625” W x 4.5” H) | $ 300 | $ 180 |
| ❑ Eighth Page Color (3.625” W x 2.125” H) | $ 175 | $ 115 |
| ❑ Business Card Color (Printed as is; psychologists’ license # required on card) | $ 125 | $ 70 |

|  |
| --- |
| **The Brochure is mailed out in July to over 7000 mental health professionals in the Los Angeles County area.**  **The Day Program will be emailed to all attendees several days prior to the Convention.** |

All display ads must be submitted via email (lacpa1@gmail.com)

We require a PDF file; export the file in high resolution (at least 266 dots per inch or better.)

**Payment must accompany form.**

*LACPA does not endorse any of the products, programs, or services advertised at the Convention.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip

(\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Fax Email

**REQUESTS FOR ADS AND EXHIBITOR’S TABLES MUST BE ACCOMPANIED BY PAYMENT.**

**MAIL TO: LACPA, 6345 Balboa Blvd., Bldg 2, Suite 126 Encino, CA 91316 818-905-0410 Fax 818-332-4949**

Visa/MasterCard No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Three digit security number: \_\_\_\_\_\_\_\_\_\_ Name as on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Required:** address associated with this card street number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ city \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and zip code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Questions? Best way to reach the office staff is by email lacpa1@gmail.com