



Asheville Home Builders Association
Website Advertising Contract
 www.AshevilleHBA.com

Business Name: _____ Phone: _____

Contact Name: _____ Website: _____
 (Ads will link to the provided website address)

Ad Options - circle ad choice(s)	Ad Size	Price (Per year)	Location/Site Statistics
Grand Placement Ads			All pages EXCEPT those listed in the below categories. <i>Home page averages 4000 views monthly.</i>
Banner	440w x 60 pix	\$900	
Button	140w x 60 pix	\$700	
Primary Placement			Displayed on the Directory page and all subsequent search pages, and the Calendar page with all subsequent event pages. <i>Monthly averages:</i> <i>Directory searches-2400</i> <i>Calendar views-1100</i>
Banner	440w x 60 pix	\$600	
Button	140w x 60 pix	\$400	
Secondary Placement			Displayed on the Homes for Sale Gallery, Newsletter and Broadcast pages. <i>Monthly averages:</i> <i>Gallery views- 250</i> <i>Newsletter views- 230</i> <i>Broadcast views- 320</i>
Banner	440w x 60 pix	\$300	
Button	140w x 60 pix	\$200	

Ad Specifications: Please submit ads digitally at the size specified, RGB, at 72 dpi and in a gif or jpeg format. Ads must be received by December 15th to guarantee the January 1st live upload. The AHBA reserves the right to refuse any ad that does not meet the standards set by the AHBA.

Billing terms: All ad spaces will be secured for one calendar year. Payment is expected in full at the time of reservation. Credit card number is required to secure quarterly payments- no exceptions. Quarterly billing is available for charges over \$1000 only.

Cancellations: *Payments received will not be refunded.* Cancellations of quarterly billed ads will be charged a 20% administrative fee of the total ad purchase price on the provided credit card number.

CHARGE MY CREDIT CARD FOR THE TOTAL AMOUNT INDICATED		<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Card Number:	<input type="text"/>	Exp. Date:	<input type="text"/> / <input type="text"/>
		3-digit Code	<input type="text"/>
Billing Address:	_____		
	City/State/Zip: _____		
I understand that this card number will be kept on file and will be charged automatically at the beginning of every quarter unless payment is previously made otherwise. In the event of a cancellation of a quarterly paid advertisement, my card will be charged a 20% administrative fee.			
<input type="checkbox"/> Charge Credit Card	<input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Quarterly Payments (credit card number required)	
Total Amount Charged: \$	_____		
Signature:	_____		

I have read and understand the above contract and agree to the terms and conditions listed herein.

 Advertiser's Signature

 Date (DD/MM/YY)

Office use:
Date Received: _____
Total Amt: _____
Amt Received: _____

Send Advertising Contract to: PO Box 9722 Asheville NC 28815
 Phone: 828-299-7001 Fax: 828-299-7008 Email: kc@ashevillehba.com