



Corrections Compendium
Advertising Contract
American Correctional Association

Company Name: _____

Contact: _____ Title: _____

Address: _____
City State Zip

Phone: _____ Fax: _____ Email: _____

Product to be Advertised: _____ Rate: (per insertion) _____

**Ads must be in black and white. Please submit a .pdf or .jpg version of your advertisement by e-mail.
All Corrections Compendium ads are non-commissionable. All orders must be pre-paid.**

Advertising Schedule:

Year	Issue	Size	Shape	Mechanical Specs
20__	Spring	_____	_____	_____
20__	Summer	_____	_____	_____
20__	Fall	_____	_____	_____
20__	Winter	_____	_____	_____

Remarks: _____

Advertiser or authorized agency must forward all materials to Corrections Compendium in accordance with deadlines. This is a legally binding contract. In signing, the advertiser agrees to abide by the contract regulations stated on the reverse side of this form. When accepted by the publisher, a copy will be signed and returned to you. Please return this contract to: **American Correctional Association, 206 N. Washington St., Suite 200, Alexandria, VA 22314.** Or fax: **703-224-0040**, E-mail: marym@aca.org

Advertiser's Authorized Signature _____

Name and Title (please print) _____ Date _____

ACA Use Only	
Publisher's Acceptance:	_____
ACA Authorized Signature	Date _____

Payment Options: (please check one)	
Credit Card: _____	___ Visa ___ Master Card ___ American Express ___ Discover Card
Card Number: _____ / _____ / _____ / _____	Expiration Date: ____ / ____ Sec. Code _____
Check _____	Check Number: _____