

natural awakenings®

HEALTHY LIVING MAGAZINE

Date _____
Business Name _____
Your Name _____
E-mail _____
Contact Phone _____
Address _____
City/State _____ Zip _____

CLASSIFIED AD PLACEMENT

- HEADINGS AVAILABLE:
For Rent For Sale
Help Wanted Opportunities
Products Speakers
- Submission in **writing** by one of the following 3 ways:
Preferred method: Email below requested information (VOFLads@naturalawakeningsmag.com)
Fax this completed form to: 386-736-3855
Send this form to: U.S. Mail
no phone-in orders, please
- Must be prepaid by credit card (call in at 386-736-3838 or fax/mail attached credit card authorization) or mail check to Natural Awakenings Magazine. Must be received by the 10th of the month prior to publication
- Cost is \$1.00 per word per month, 10-word minimum (word-count determined by Microsoft Word) **No Websites printed in Classified Section.**
- Ads run in 3-month increments only prepaid – state months below

WORD COUNT _____ **TOTAL COST** _____

3-Month Minimum _____

HEADING REQUESTED (see above) _____

CLASSIFIED READS (Please print)



Natural Awakenings – Volusia/Flagler
Classified Ad Credit Card Billing Authorization Form

All requested information is required

I authorize Natural Awakenings to bill the card listed below as specified:

Amount: \$ _____

Billing on: _____
(Today's date)

Natural Awakenings accepts the following credit cards:

PLEASE CIRCLE ONE: *Visa, MasterCard, American Express, Discover.*

Business Name _____

Credit Card # _____ Expiration _____

Phone# Contact _____

Name as it appears on Credit Card: _____

Billing Address for Credit Card: _____
_____ Zip _____

3 Digit Code (from signature line on back of credit card): _____

4 Digit Code for AX (on front of card): _____

_____ Date: _____
Cardholder's Signature

PRINT FORM - PROVIDE INFORMATION – FAX TO 386-736-3855 or RETURN BY MAIL to address below. ALL INFORMATION IS CONFIDENTIAL AND SECURED.