

## **Program Advertising Contract**

Company Name:	
Address:	
City / State / Zip:	
Phone Number:	
E-Mail Address:	
Print Name:	
Authorized Signature	Date
balletandallthatjazz@	tising requested and e-mail the advertisement to om with the subject name "Program Advertising".
Size:	Price:

Please make the check payable to: Ballet and All That Jazz, LLC

Please mail the completed contract with a full payment to:

Ballet and All That Jazz 6 Greenwood Drive East Greenbush, NY 12061