

**SOUTH JERSEY PARALEGAL ASSOCIATION
MARKETING ORDER FORM**

1. ADVERTISING \$ _____

Number of Issues _____
Ad Size _____

2. SPONSORSHIP \$ _____

Level One:
Number of dinner meetings _____

Level Two:
Number of dinner meetings _____

Web site 1 year _____
Web site 6 months _____

3. MEMBERSHIP – must complete membership form (see web site) \$ _____

Placement Agency _____

Sustaining Membership _____

TOTAL: \$ _____

Special Instructions:

Authorized Signature and Contact Information:

**Please be advised that, although we will attempt to accommodate your request, all sponsorships are on a first come, first serve basis. Vendors are permitted to sponsor multiple events. All sponsorships must be paid in full at time of purchase.*

PLEASE RETURN THIS FORM WITH PAYMENT TO:

**Marketing Committee
South Jersey Paralegal Association
P.O. Box 355
Haddonfield, NJ 08033**