



BANQUET PROGRAM BOOKLET ADVERTISEMENT FORM

Name of Advertiser

Name of Contact Person
(with Address and
Telephone Number)

Indicate with a check the type of advertisement				
Full Page \$100	Half Page \$75	Quarter Page \$60	Eighth Page \$40	Banquet Patron \$10

Enclosed please find a check for the amount of \$_____ made payable to **BEAVER COUNTY SPORTS HALL OF FAME**. Reply is requested by March 28.

IMPORTANT: Please enclose a copy of your advertisement.

Please mail the check and this form to:
BEAVER COUNTY SPORTS HALL OF FAME COMMITTEE, 125 Redbud Drive, Beaver Falls, PA 15010