



# CHANGING FACES THEATER COMPANY

P.O BOX 1868 LODI, CA 95241

(209) 747-8043

WWW.CHANGINGFACESTHEATER.ORG

Advertisement

Due: Friday, June 18th

Cast/ Staff Member's Name: \_\_\_\_\_

Cast/ Staff Member's Phone Number: \_\_\_\_\_

Who purchased the ad? \_\_\_\_\_

What is their phone number? \_\_\_\_\_

## Advertisement Sizes and Costs:

Business Card = \$25

1/4 page = \$50

1/2 page = \$100

Full Page = \$200

Is this a **BUSINESS** or **PERSONAL** ad?

Please cut on the dotted line and give the slip below to the purchaser.  
Please give top half completed AD form and payment to Stage Manager.

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Cast/ Staff Member's Name: \_\_\_\_\_

Ad Purchaser's Name: \_\_\_\_\_

Size and cost of ad purchased: \_\_\_\_\_

**Thank You For Supporting Changing Faces Theater Company!**

Tax I.D. #76-0718614

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