



ANDROS SOCIETY OF USA, INC.

Non-Profit Organization

SPONSORSHIP & ADVERTISEMENT FORM

Please return by mail or email. Both addresses are listed at the bottom of the form.

Client Information

Name: _____

Address: _____ City: _____ State: _____ Postal Code: _____

Email Address: _____ Phone Number: (____) _____

Sponsorship Opportunities

***Note: Please email files with advertisement materials and any artwork to info@androssocietyusa.com or call (516) 220-6088*

Journal Book Ad:

- \$100 (Full Page Color)
- \$200 (Silver Page)
- \$300 (Gold Page)
- \$500 Front or Back Cover Page
- \$2000 Table Sponsorship (10 tickets + Gold Page)



Scan QR to purchase Journal AD

TOTAL AMOUNT DUE: _____

PAYMENT BY: Cash Credit card Check (payable to Andros Society of USA, Inc.)

For Credit Card Payments ONLY:

Credit Card Type: MasterCard Visa American Express Discover Card

Credit Card Number: _____

Expiration Date : ____/____/____ Security Code: _____ Zip Code: _____

Cardholder's Signature: _____ Date: ____/____/____

I hereby sign to authorize a one-time charge on my credit card for the "TOTAL AMOUNT DUE" written above.

ANDROS SOCIETY OF USA, Inc.
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