

# Web Site Advertising Order Form

APTA/Colorado Chapter's Web Site: [www.aptaco.org](http://www.aptaco.org)

Date Submitted: \_\_\_\_\_

**DISPLAY AD:** Dimensions below include border. Ad copy / artwork must be submitted in electronic format (JPG or TIF) to [apta@assnoffice.com](mailto:apta@assnoffice.com). Please provide a URL address if you would like it linked to your advertisement.

- "Home"** web page bottom ([www.aptaco.org](http://www.aptaco.org)):
- Large Ad** (max size: 600 x 150 pixels):       3 months - \$500       1 month - \$250
- Small Ad** (max size: 200 x 250 pixels):       3 months - \$350       1 month - \$175
- "Events"** web page bottom ([www.aptaco.org/events/events.htm](http://www.aptaco.org/events/events.htm)):
- Large Ad** (max size: 600 x 150 pixels):       3 months - \$400       1 month - \$200
- Small Ad** (max size: 200 x 250 pixels):       3 months - \$250       1 month - \$125
- "Students"** web page left side bar ([www.aptaco.org/students/students.htm](http://www.aptaco.org/students/students.htm)):
- Side Bar Ad** (max size: 170 x 250 pixels):       3 months - \$225       1 month - \$100

**EVENT AD:** Placed on the **"Calendar of Events"** web page. Please type your ad exactly as you wish it to appear in the listing and attach, or email copy to [apta@assnoffice.com](mailto:apta@assnoffice.com).

- Event Ad** (copy only—no artwork; URL link accepted):       3 months - \$250       1 month - \$125

Contact person \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email\*\* \_\_\_\_\_ Web \_\_\_\_\_

\*\*If paying by credit card, your receipt will be emailed to this address.

## PAYMENT

Check # \_\_\_\_\_ Cardholder's name (print) \_\_\_\_\_

MasterCard     VISA     Amex

Discover      Card # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Purchase Order # \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature \_\_\_\_\_

PLEASE NOTE: APTA is opposed, as a matter of health care policy, to arrangements under which sources of referral (including physicians) stand to profit from referring patients for physical therapy. The policy, adopted by the House of Delegates, states: "The American Physical Therapy Association opposes ... participation in services that is in any way linked to the financial gain of the referral source." Financial Considerations in Practice (HOD 06-99-13-17).

Because of this policy, APTA/Colorado Chapter's Job & Services Store does not accept job listings for positions in a practice if any physician has a financial interest in the practice and refers patients to an employed physical therapist or to a physical therapist who supervises an employed physical therapist assistant. To complete your submission, you must make the following certification by checking the "I agree" box below:

"I certify that no referral source (including any referring physician) has a financial interest in the practice that has the position that is the subject of this advertisement."

**I AGREE**

**Please return this form with payment to:**

**APTA/Colorado Chapter**, 7400 East Arapahoe Road, Suite 211, Centennial, Colorado 80112-1279  
Fax (303) 694-4869 / [apta@assnoffice.com](mailto:apta@assnoffice.com) / Phone (303) 694-4728, (800) 875-2782

<b>For APTA Use</b>	Received _____	Paid \$ _____	Ck#/CC _____
Auth. _____	Q _____	Copy/Art received _____	Date Posted ____/____/____