

# LAVMC Old Days 2025 Insertion Order / Donation Form

## Authorized Applicant Information

**Name / Your Name:**

**Other Business Name(s):**

**Email Address:**

**Contact Phone:**

**Membership Status:** [ ] Member [ ] Non-Member

## Premium Pages (Color, Excludes Discounts)

☐ Center 1-Page Left-Right Non-Member - \$389

☐ Inside Front/Back Cover Non-Member - \$369

☐ Outside Center Page Non-Member - \$369

☐ Center 1-Page Left-Right Member - \$369

☐ Inside Front/Back Cover Member - \$349

☐ Outside Center Page Member - \$349

## Ad Donation Selection

☐ Full Page Non-Member - \$199

☐ Half Page Non-Member - \$149

☐ Third Page Non-Member - \$109

☐ Business Listing Non-Member - \$69

☐ Full Page Member - \$179

☐ Half Page Member - \$129

☐ Third Page Member - \$99

☐ Business Listing Member - \$59

☐ In House Artwork - \$20

☐ Club Member Discount: +\$30

☐ Non-Profit Discount: Pay 50% of Sub-Total

**Smart Phones  
Scan To Pay**

**Payment Information** **please add all above**

**Sub-Total:** \_\_\_\_\_

**Total Donation Amount:** \_\_\_\_\_

**Mailing Check (Payable to LAVMC):**

**LAVMC, PO Box 13, Los Alamos, CA 93440**

## Authorization

**By signing, I have the authority to sign for this entity and hereby release LAVMC & affiliates from any claims, damages, or liabilities related to this event. I understand my printed name hereto represents my signature and legally acts as my signature by hand. Authorized**

**Signature (Printed Name):** \_\_\_\_\_ **Date:** \_\_\_\_\_