



1- Month Trial

Section One

Name of Business: _____ Type of Business: _____
 Address: _____
 State: _____ Zip: _____
 Telephone: (____) _____ Fax: (____) _____ E-Mail: _____
 Web Address: _____
 Contact Name: _____ Telephone: (____) _____ Ext. _____

Notes/Questions/Comments: _____

*Please mail or fax this document to Arizona Roundup Premiere Guide. Once this form has been returned, you may proceed to Section Three. In our response, we will inform you on what types of advertising space we currently have available for your business.

Mail Arizona Roundup P.O. Box 7443 Chandler, AZ 85246 -7443	Fax: 480-452-1421 *Please be sure to include a fax number if different than the one provided above.
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Section Two (To Be Completed By Arizona Roundup Premiere Guide)

Your request is: **Approved** **Not Approved** **Pending**
 Reason (If not approved or pending): _____

Arizona Roundup Premiere Guide has given approval for _____ to place advertisement (s) on www.azroundup.com. We hereby acknowledge that we are able to accommodate your request at this time. and have space available for your advertisement under the _____ Plan. Customer may have this space without charge for a 1-month period beginning on _____ and ending on _____, at which time you may elect to continue. *Extension periods are negotiable.

Authorized By: _____ Date: _____

This section to be completed by authorized personnel only:

Advertiser / Vender hereby grants Arizona Roundup Premiere Guide the right to post all documents, files, photos, videos, and logos provided onto the website, www.azroundup.com. Advertiser / Vender may elect to pull their advertisement at any time upon request. ***Please read Terms and Conditions On Back.**

First Name: _____ Last Name: _____
 Position with Company: _____
 Signature: _____ Date: _____



TERMS AND CONDITIONS

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**For Questions Contact:
Arizona Roundup Premiere Guide**

P.O. Box 7443

Chandler, AZ 85246 - 7443

(T) 480-330-7442

(F) 480-452-1421

info@azroundup.com