



Gold Wing Road Riders Association
Region B – NH District - Chapter T
“Seacoast Region Wings”



Newsletter/Website Ad Form

Date: _____

Business Name: _____

Mailing Address: _____

Physical Address: _____

Phone Number: _____

Contact Person: _____

Website: _____

* Please attach company business card

Please select one:

_____ Business Card - \$50 (Annually)

_____ Quarter Page - \$100 (Annually)

_____ Half Page - \$150 (Annually)

_____ Full Page - \$200 (Annually)

_____ Begin Date (For Ad Run)

_____ End Date (For Ad Run)

_____ Copy of Ad or Business Card Attached

Total Amt Due: _____

Please Make Check Payable To: GWRRA NH-T

GWRRA NH-T Ad Receipt

Received From: _____ Date: _____

The Sum of \$ _____ for _____ Page Ad to be published in the GWRRA NH-T Newsletter & NH-T Chapter website.

NH-T Representative/Title
GWRRA NH-T
www.gwrra-nht.org
“Seacoast Region Wings”