



Company Information

ISA-NFS Member #: _____ *Company Name: _____

*First Name: _____ *Company Address: _____

*Last Name: _____ Company Address 2: _____

Title: _____ Company City, State:, Zip _____

*E- Mail: _____ *Phone: _____

2009 2010 Show Program Directory Advertising Rates						
Ad Type	ISA Member			Non Member		
	Ad Price	# Ordered	Total \$	Ad Price	# Ordered	Total \$
Full Page	\$295		\$	\$370		\$
Full Page – Back Cover	\$500	1	\$	\$585	1	\$
Half Page	\$225		\$	\$275		\$
Quarter Page	\$165		\$	\$210		\$
Business Card	\$ 50		\$	\$ 75		\$

Order and Payment Information



Credit Card Invoice Me Check Enclosed

Card Number: _____ Expiration Date: _____

First Name: _____ Last Name: _____

Company: _____

Address: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Email completed form with ad copy to: mao@hot-training.com
Questions call Steve Smith (716) 839-4008, Terry Richard (716) 430-3801
or Mary Ann O'Connor (716) 694-1393