



110TH ANNUAL MEETING AND CONFERENCE SEPTEMBER 24 - 28, 2025

ATLANTA, GEORGIA | OMNI ATLANTA HOTEL AT CENTENNIAL PARK

2025 BLACK HISTORY THEME: AFRICAN AMERICANS AND LABOR

DIGITAL ADVERTISER REGISTRATION FORM

All ads must be 300 dpi, camera ready CMYK or grayscale and submitted electronically to asalh.org/upload no later than **August 22, 2025**



<p>Full Page Ad 8.75" x 11.25" full bleed 7.5" x 10" no bleed</p> <p><input type="checkbox"/> \$575 <input type="checkbox"/> \$475 Members</p> <p>Qty. _____</p>	<p>Half Page Ad 7.5" x 4.75"</p> <p><input type="checkbox"/> \$300 <input type="checkbox"/> \$250 Members</p> <p>Qty. _____</p>	<p>Quarter Page Ad 3.5" x 4.75"</p> <p><input type="checkbox"/> \$225 <input type="checkbox"/> \$175 Members</p> <p>Qty. _____</p>	<p>Corporate Ad 8.75" x 11.25" full bleed 7.5" x 10" no bleed</p> <p><input type="checkbox"/> \$1200 Full Page <input type="checkbox"/> \$600 Half Page <input type="checkbox"/> \$250 Quarter Page</p> <p>Qty. _____</p> <p><i>No sponsor benefits included</i></p>
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Note: There will be a charge of \$100 or more for all ads submitted non-camera ready.
If you do not receive confirmation from ASALH that we've received your ad, email programads@asalh.org

Prices are subject to change.

ADVERTISERS: PLEASE TYPE OR PRINT CLEARLY

Prefix _____ First _____ M.I. _____ Last _____ Suffix _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Goods/Services _____ Website _____

Facebook _____ Twitter _____ Instagram _____

FOR ADVERTISERS ONLY:

I, (print name) _____, certify that I have read the Contracts and Liabilities Agreement and agree to adhere to the terms and conditions outlined for this conference.

Signature _____ Date _____

PAYMENT INFORMATION

Method of Payment: Check or Money Order Visa MasterCard AMEX CVV Code _____ Paid Online

Card Holder's Name _____ Card number _____ Exp. Date ____ / ____

Billing Address _____

Signature _____ Date _____