

DDNA Classifieds

Line Ad Submission Form



DDNA reserves the right to reject any advertisement not in keeping with the standards and policies of the Association. Ads will run for 30 days from date of posting. Payment by check preferred. Include check with submission. Your ad will be posted as received without copy editing. Please check all content for accuracy. Ads must be typewritten or submitted via email (call (407)835-0642 for instructions). No refunds on posted ads.

Please type text here (max 500 words) or include text on a separate typewritten page or email:

Please check the box for the type of line ad desired from the list below:

	Price	Number of months to run ad	Total price
Nurse seeking employment <input type="checkbox"/> Members: \$50 for 500 words (maximum) per month. <input type="checkbox"/> Non-members: \$100 for 200 words (maximum) per month / \$200 for 500 words (maximum) per month.			
Individual nurse consultants <input type="checkbox"/> \$100 for 200 words (maximum) per month / \$200 for 500 words (maximum) per month.			
Employer seeking nurse <input type="checkbox"/> \$100 for 200 words (maximum) per month / \$200 for 500 words (maximum) per month.			
Items for sale/Misc. <input type="checkbox"/> Members: \$50 for 500 words (maximum) per month. <input type="checkbox"/> Non-members: \$100 for 200 words (maximum) per month / \$200 for 500 words (maximum) per month.			

Mailing Address:

Total: \$ _____
make check payable to DDNA

Contact Name: _____ Phone: _____
 E-mail address: _____ Member Number (if applicable): _____
 Address: _____
 City: _____ State: _____ ZIP: _____

Sign and return this form with payment to:

DDNA
 P.O. Box 536489
 Orlando, Florida 32853-6489

 Advertiser or other authorized signature

 Date