ADVERTISER REGISTRATION SCACS CONVENTION

South Carolina Association of Christian Schools Marriott Hotel and Convention Center (Spartanburg) September 28-29, 2017

PHONE

ORGANIZATION

Name:

Workshop Title:

Short Workshop Description:

ADDRESS		FAX
CITY	STATE	ZIP
REPRESENTATIVE'S NAME	EMAIL ADI	DRESS
ADDRESS	I	PHONE
CITY	STATE	ZIP
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Rates: One page is 5 ½ x 8 ½ inches. Camera ½ Page (black and white) @ \$100.00 1 Page (black and white) @ \$150.00 Inside front or back cover (full page, Outside back cover (full page, color)) 	ine – August 21, 2017 Amount: Amount: Amount: Amount: Amount:
 ½ Page (black and white) @ \$100.00 1 Page (black and white) @ \$150.00 Inside front or back cover (full page,) 	Amount: Amount: Amount: Amount:

If you have suggestions as to how we can improve our convention and make it more meaningful for you and your organization, please make those comments on the reverse side of this form. Your input would be greatly appreciated.

Email:

The person shown below would like to do the following workshop (must be submitted by July 1, 2017).

Please return this form along with appropriate fees to: SCACS, 615 St. Andrews Road, Columbia, SC 29210 FAX: 803-798-7548

or

email completed form to scacs@christianeducation.org