



AD FORM

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LAST NAME:		FIRST N	IAME:	MIDDLE INITIAL:	GENDER (M/F)	
BUSINESS OR CHURCH NAM	ЛE:	•			•	
STREET ADDRESS:						
CITY:		STATE:		ZIP CODE:		
CONTACT NAME:		CONTA	ACT PHONE:	CONTACT E-MAIL:		
AUTHORIZED SIGNATURE:			<u>, </u>	DATE:		
SPECIAL 2025 AD PRICES ALL PRINT-READY ADS and FULL PAYMENTS must be RECEIVED by MARCH 1, 2025, in order to be			Make checks payable to: Boulevard Church of Christ Please write "NTW AD" on the memo line. Mail completed AD registration form, and full payment to: NATIONAL TEACHERS' WORKSHOP — ADS			
included in the NTW program booklet. NO EXCEPTIONS!! Email to: nationalteachersworkshop@gmail.com (PDF/JPG/PNG Format)			4439 E Men	4439 Elvis Presley Blvd. Memphis, TN 38116 ALL ADS MUST BE PRINTER READY and submitted in PDF, JPG, or		
AD COST: \$100	# ADS REQUESTED:	TOTAL DUE:	EMAIL ADS TO: nati	PNG FORMAT. ionalteachersworkshop 01) 345-1591 or (773) 5	@gmail.com	
TOTAL AD \$ PAYMENTS DUE			FOR STAFF USE ONLY Date received: Amount Received:			
TOTAL AMOUNT \$ ENCLOSED			Cashier's Check OR Mone Payment Received by: Payment Recorded by:	Personal/Business Check #: Cashier's Check OR Money Order #: Payment Received by: Payment Recorded by: Comments:		