

PRINT ADVERTISING | MEDIA KIT



- Advertising** Bi-Monthly Newsletter
- Issues** 6 Per Year
- Readers** 2,500
- Publication** 16 Page | Full Color | Gloss Stock
- Region** Greater Harleysville | North Penn Area
- Distribution** Bulk Mail
- Ad Sizes** Full Page | Half Page | Quarter Page | Business Card

FOR MORE INFORMATION CONTACT:

CONNIE MAURER | cmaurer@ghnps.org | 215-256-6900, ext. 104



2020 GHPSS Bi-Monthly Newsletter Advertising Rates

Over 2,500 full color newsletters distributed on a bi-monthly basis!

Ad Size	1 Issue	3 Issues	6 Issues
Business Card	\$100	\$250	\$475
Quarter Page	\$125	\$325	\$625
Half Page	\$175	\$500	\$925

Newsletter Advertisement Selection

Ad Size

- Business Card (3.75" w X 2.25" h)
- Quarter Page (3.75" w X 5" h)
- Half Page (8" w X 5" h)

Issue Selection

- January/February
- March/April
- May/June
- July/August
- September/October
- November/December

Ad Frequency

- 1 Issue
- 3 Issues
- 6 Issues

Total Amount Due: \$ _____

Send payment along with this completed form to:

GHPSS
 Attn: Connie Maurer
 312 Alumni Avenue
 Harleysville, PA 19438

Send full color ad to:
cmaurer@ghnpss.org

(We accept high resolution [300dpi] PDF, TIFF and JPG file formats)

QUESTIONS?

Contact Connie Maurer at
215-256-6900, ext. 104
cmaurer@ghnpss.org

Increase Your Exposure and Save! Place a website ad along with a newsletter ad and SAVE 15%.

PAYMENT INFORMATION

Name *(if using a credit card, list your name as shown on your card)* _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

- Check Enclosed (pay to GHPSS) Please Invoice Me
- Credit Card ___ MasterCard ___ Visa ___ American Express


Account # _____ Expiration Date _____ Zip Code _____ CW/CVC _____

DIGITAL ADVERTISING | MEDIA KIT



Advertising	Digital (Website)
Frequency	3 mos. 6 mos. 9 mos. 12 mos.
3 Websites	GHN PSS Encore Experiences The PEAK Center
Website Visitors	1000 unique visits per month
Digital Ad Sizes	468x100 (pixels) 232x150 (pixels)
Features	Change banner art monthly during your contract

Greater Harleysville and North Penn Senior Services (GHN PSS) thanks the Aging & Adult Services of Montgomery County for their generous support.




**Advertise HERE
and get noticed!**


Greater Harleysville and North Penn Senior Services (GHN PSS) operates both Encore Experiences in Harleysville and The PEAK Center in Lansdale. The mission of Greater Harleysville and North Penn Senior Services is to provide access to programs and resources that help older adults live independently and remain active. Both centers offer a place of comfort, fellowship and care to the seniors in our community.

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Visit Encore Website



Visit PEAK Website

FOR MORE INFORMATION CONTACT:

CONNIE MAURER | cmaurer@ghnps.org | 215-256-6900, ext. 104



2020 Digital Website Advertising Rates

Get seen on up to three websites with over 1000 unique visitors per month.

Digital Ad Size	3 Mos.	6 Mos.	9 Mos.	12 Mos.
468x100 (GHPSS Only)	N/A	\$1,500	N/A	\$2,500
468x100 (1 Website)	\$350	\$525	\$875	\$1,250
486x100 (2 Websites)	\$450	\$625	\$975	\$1,350
232x150 (1 Website)	\$250	\$425	\$750	\$1,100
232x150 (2 Websites)	\$350	\$525	\$850	\$1,200

Send payment along with this completed form to:

GHPSS

Attn: Connie Maurer
312 Alumni Avenue
Harleysville, PA 19438

Send full-color ad to:
cmaurer@ghnpss.org

(We accept JPG and PNG files at 72dpi or higher)

QUESTIONS?

Contact Connie Maurer at
215-256-6900, ext. 104
cmaurer@ghnpss.org

Digital Website Advertisement Selection

Websites (check all that apply)

- GHPSS (Home Page)
NOTE: 468x100 banner ad only
- Encore (Community Partners Page)
- PEAK (Community Partners Page)

Ad Frequency

- 3 Months
- 6 Months
- 9 Months
- 12 Months

Total Amount Due: \$ _____

Increase Your Exposure and Save! Place a newsletter ad along with a website ad and **SAVE 15%**.

PAYMENT INFORMATION

Name *(if using a credit card, list your name as shown on your card)* _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

- Check Enclosed *(pay to GHPSS)* Please Invoice Me
- Credit Card ___ MasterCard ___ Visa ___ American Express

Account # _____ Expiration Date _____ Zip Code _____ CW/CVC _____