



LYMPH E-LINK ADVERTISING INTRODUCTORY RATES

The National Lymphedema Network (NLN) is thrilled to introduce its Bi-Monthly (every 2 months) E-link. This electronic Newsletter will consistently provide NLN members with more clinical articles, patient perspectives, and updates related to the lymphedema community. This is a great opportunity to advertise your company, services, and/or products using our new online resource! Take advantage now and increase your marketing success.

Two size/placement options:

1. Full Width Banner – \$500

Instant exposure! One of the first things subscribers will see is your advertisement featured across the top of E-link. Maximize your advertisement with this full header space.

600 pixels W by 85 pixels H. This ad bar stretches across the top of the electronic Newsletter.

2. Square Sidebar Ad – \$300

Our most economical add. 100 x 100 pixels.
This ad will appear in the side bar, underneath the links.

New Product Section: \$650

Do you have a new product? Feature your product in a special “Product Profile” section of the E-link. The section will be placed among feature articles and stories in the body of our newsletter.

Image of new product is 100 x 100 pixels. Please include a URL that you would like your image to link to. We request a review of your product (200 words or less) from a lymphedema therapist or doctor who can identify the benefits of your product, including patient compliance and satisfaction.

Ads and images must be submitted as 72 dpi RGB jpgs or gifs.

1. **Issuance** – Bi-Monthly (every two months)
2. **Acceptance of Advertising** - Display advertising will be accepted from active NLN Supporters only. Prior to publication, all ads are subject to approval by the e-Link Editorial Committee. NLN reserves the right to refuse publication of any ad at its discretion.
3. **Coverage and Market** - e-Link Newsletter will be sent to all NLN Members and Affiliated clinics, therapists, training schools, support groups, and our international members.
4. **Payment Policy** - All ads must be prepaid and received in the NLN office by the deadlines listed below (15th of month prior to publishing) in order to appear in the current Lymph e-Link. Please note that due to strict deadlines, no exceptions will be made. Payment may be sent by mail, fax, or online at www.shop.lymphnet.org. The NLN accepts payments via check, Visa, MasterCard, American Express, and Discover Card.



NLN E-Link Advertising Rates

Updated November 10, 2010

Please accept the enclosed ad for consideration of publication in the following issue(s) of *E-link*:

- | | |
|--|---|
| <input type="checkbox"/> November 2010 | Submission due by: October 15, 2010 |
| <input type="checkbox"/> January 2011 | Submission due by: December 15, 2010 |
| <input type="checkbox"/> March 2011 | Submission due by: February 15, 2011 |
| <input type="checkbox"/> May 2011 | Submission due by: April 15, 2011 |
| <input type="checkbox"/> July 2011 | Submission due by: June 15, 2011 |

The enclosed artwork is complete and within the specifications noted on the previous page.

I understand that:

- One ad per company/organization (paid by and featuring that company/organization as the main focus/subject of the ad) will be eligible for each issue, and
- This ad is subject to approval by the e-Link Editorial Committee.

I agree that the publisher (NLN) is not responsible for delays or missed deadlines due to a submission by me/my company of inaccessible files or file errors. I further understand that publication is not guaranteed and that I will be notified regarding approval/ refusal, with a complete refund of payment made to me/my company if the ad is not approved.

Payment Type:

Payment has been submitted through the NLN's online store. <http://www.shop.lymphnet.org/>

Check enclosed in the amount of \$ _____

Please charge the amount of \$ _____ to my credit card

Visa Amex Master Card Discover Card

Card Number: _____ Exp. _____

Card Holder Signature: _____

Signed: _____ Date: _____

Print Name: _____ Title: _____

Name of Company: _____

For Official Office Use Only:	
Date Received: _____	
Amt Paid: \$ _____	Paid by <input type="checkbox"/> Ck # _____
<input type="checkbox"/> Charge 4 digits: _____	
Approved? Y N	Approved by: _____
<input type="checkbox"/> Copy Received	Format: <input type="checkbox"/> jpg <input type="checkbox"/> gif
Date Received: _____	<input type="checkbox"/> Problem with Copy
Comments: _____	