

# MIGRATION INFORMATION SOURCE

FRESH THOUGHT, AUTHORITATIVE DATA, GLOBAL REACH

## E-Newsletter Ad Form

(Please print clearly)

Today's date (submission date) \_\_\_\_\_

Ad Type  Text Ad  Event Listing or short mention

Name of file or pictures \_\_\_\_\_

Date for ad to run: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Billing Address:

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Work Address (if different from billing):

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Tax exempt #: (if applicable) \_\_\_\_\_

Payment Method:

Check

Please make checks out to the **Migration Policy Institute** and mail to

Migration Policy Institute

Attn: Ad Sales

1400 16<sup>th</sup> St. NW, Suite 300

Washington, DC 20036

Credit Card (only those listed are accepted)

Number \_\_\_\_\_

Expiration Date (mm/yy) \_\_\_\_\_ Type:  Master Card  Visa

I authorize the charge to my Visa or MasterCard account number on this form in the amount of \_\_\_\_\_.

Signature: \_\_\_\_\_

Wire transfer (Please note your bank may charge you a transfer fee. Please contact April Siruno at 202-266-1908 for details).

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please email to [info@migrationpolicy.org](mailto:info@migrationpolicy.org) or fax to 202-266-1900. For questions, please call April Siruno at 202-266-1908.

Internal Use only   Sales Rep Init:			
Reviewed	Approved	Notified	Payment Received
Date:	Yes No	Date:	Date: