

ORDER FORM

Name and title of person placing order: _____

Organization: _____

Address: _____

City: _____ State: _____ ZipCode: _____

Telephone: (_____) _____ FAX: (_____) _____ e-mail: _____

Contact name and number (if different from above) for copy, artwork, or production or for any other arrangements you need to have made: _____

Contact name and phone number (if different from above) for billing and payment, if you would like to be billed: _____

Show or shows you wish to participate in: "Spontaneous Combustion™" "Blind Justice™"

TV sponsorship level selected (length and/or location of spot): _____

TV sponsorship rate per show: \$ _____ Number of times run (number of programs): _____

Total TV sponsorship: \$ _____ Start date: _____ Finish date: _____

Segment sponsorship: Name of segment selected: _____

Segment sponsorship rate: _____ Number of segments being sponsored: _____

Other information for television spots or credits: _____

World Wide Web ("WWW") sponsorship level selected: _____

WWW sponsorship rate per show: \$ _____ Number of times run (number of programs): _____

Total WWW sponsorship: \$ _____ Start date: _____ Finish date: _____

Link information to link your Web site to USA-TN viewers: _____

Other information for World Wide Web spots, credits, links, pages, et cetera: _____

Election to be identified as an Underwriter means receiving an announced underwriter credit such as "This program was made possible by a generous gift from [YOUR NAME]." Underwriters also can elect to remain anonymous.

WWW Underwriting = \$ _____ TV Underwriting = \$ _____ Check here for anonymity:

Advertising Agency contact information (if applicable): _____

TOTAL TO BE PAID BY ORGANIZATION: \$ _____ Paid via: Check VISA MasterCard

If a credit card is used: Full Name on credit card: _____

Card Number: _____ Expiration Date: _____

APPROVAL SIGNATURE: _____ DATE: _____

Name/title of authorizing person, if different from signature, above: _____

Please return this form, with payment in full, to the address, below. [You also may FAX forms to \(303\) 666-0750.](tel:3036660750)

Thank you very much.