

PAPERCLIPS



**Market to over 850 business decision-makers
with your own promotional piece in a PTLA envelope!**

Send PTLA members your flyer or direct mail piece without the extra work.

**Promotions • Discounts and Coupons • Sales • Products and Services
New Locations • Grand Openings • Special Events**

Take advantage of this affordable, time-saving promotion for just \$295 per mailing*:

1. Call PTLA at 717/232-8880 x105 to reserve or email leannm@patourism.org and fax the tear-off below. **Mailing dates are: September 18, January 15 and May 14.**
2. Deliver 900 copies of your flyer to PTLA offices at 128 Walnut Street, Harrisburg by the **drop off dates: September 12, January 9 and May 8.**
3. Sit back, relax and let us do the rest of the work. Your flyer will be included in a mailing to over 850 members in our PTLA envelope.

A maximum of 15 member flyers are sent per **PaperClips** mailing, so reserve early. All promotional materials must have prior approval by PTLA at least two weeks before drop date. If you have any questions about this opportunity, call Leeann MacWilliams at 717/232-8880 x105.

*Postage is based on 20 lb. paper. Anything heavier may result in a surcharge of \$25 for every tenth of one ounce over. The maximum weight is one ounce. If you have concerns about your paper weight, send a sample flyer to us for weight verification. PTLA reserves the right to reject any flyers that it deems inappropriate for distribution. Call the PTLA if you have questions about your flyer.

Cancellations must be made three weeks prior to the drop date. Members cancelling after that time will be responsible for the cost.

I would like to participate in **PaperClips** on: Sep 18 Jan 15 May 14

Name: _____

Company: _____

Address/City/State/Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Check enclosed for \$ _____ *Please make check payable to PA Tourism & Lodging Association

Invoice company above for \$ _____

Credit Card payment of \$ _____ Visa MasterCard Discover American Express

Card number: Exp. Date: Ver. Code

Cardholder's Signature: _____

Cardholder's Name (Print): _____

Credit Card Billing Address (Print): _____