



Acceptance of Online Advertising

A written insertion order is required for all advertisements. All advertisements are subject to approval. The University of Chicago Press reserves the right to reject advertising for any reason. The advertiser and/or its advertising agency are entirely responsible for the lawfulness of all ad content and for conformance to government regulations of advertising.

Online Ads should be submitted by email. All ads are 300 pixels wide by 250 pixels high. Ads should not be animated. The maximum file size is 100KB and Images should be optimized for the web with a resolution of 72dpi. File formats accepted are GIF, JPEG, and PNG. A linking URL must be supplied with each ad. Ads may be in rotation with a maximum of five ads running at any given time. Ads will change with each new page view. Advertisers may request an ad to start at any time, subject to space availability, with a minimum of one week advance notice.

Cancellations of reserved ad space are not accepted on or after insertion order deadline.

Rates & Agency Commission:
Please refer to 2014 Advertising Rate Sheet. All rates noted in the rate sheet are GROSS. A 15% agency discount will be allowed to advertising agencies.

Payment is due 30 days from invoice notice. The University of Chicago Press has the right to hold the advertiser and/or its advertising agency jointly and severally liable for monies due and payable to the publisher.

Please submit a copy of your ad with this form to:

Advertising Coordinator
j-advertising@press.uchicago.edu
Phone: 773.702.0224
Fax: 773.834.3480

Online Advertising Insertion Order Form

Advertiser

Company name: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact: _____ Phone: _____
Email: _____ Fax: _____

Agency

Company name: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact: _____ Phone: _____
Email: _____ Fax: _____

Online Instructions

Publication(s): _____
Start Date: _____ End Date: _____
Click Through URL: _____
Production Contact: _____ Phone: _____
Email: _____ Fax: _____

Billing Instructions

Gross Amount : \$ _____ Net Amount: \$ _____
Please refer to 2014 Advertising Rate Sheet *Less 15% agency discount or other applicable discount (please specify below):*

Send invoices to: Advertiser Agency Purchase Order #: _____

Signature Date

Name (print or type)