



ALARM ADVISORS DONATED AD PROGRAM ENROLLMENT FORM



Publishing Company: _____

Contact Name: _____ **Title:** _____

Contact E-mail: _____ **Phone:** _____

We agree to place, at minimum, a one-quarter page advertisement or one equal to the largest advertisement in the heading classification, whichever is largest. This advertisement is published in all directories and should be listed under ALL of the following primary headings or under comparable headings:

- Burglar Alarm
- Security Control
- Security Guard

Comparable Heading Classifications Used: _____

Signature: _____ **Date:** _____

Directory Name	Directory Code	Circulation	Copy-In Date	Pub Date	Ad Size Specs	Color Specs	Special Instructions

E-mail Form to: info@adp.org or Fax Form to: (770) 462-0457