



# SEMA Show 2004 Official Show Directory & Pocket Guide

## ADVERTISING INSERTION ORDER

To reserve your advertising space in the SEMA Show 2004 Show Directory and/or Pocket Guide, complete and sign this form, and return with payment by September 1, 2004, to:

SEMA Show Directory, 1575 S. Valley Vista Dr., Diamond Bar, CA 91765, fax: 909/396-4981

For questions regarding advertising, contact:

Joe Sebergandio at Motor Media Inc., 818/649-7867, fax: 818/649-8227, or sales@motormediainc.com

Exhibitor/Advertiser: \_\_\_\_\_

Order Date: \_\_\_\_\_ SEMA Show 2004 Booth Number: \_\_\_\_\_

**Yes! Please reserve the following advertising space for my company in the 2004 SEMA Show publications:**

### SHOW DIRECTORY

**New Ad**    **Ad Size**     Premium \_\_\_\_\_     Full Page     Half Page     Logo Only  
**Color**     4-Color     2-Color     Black/White

**Pick Up**    Pick up material from 2003 Show Directory    Net Rate \$ \_\_\_\_\_

**BONUS!**     Logo with purchase of Show Directory ad    Net Rate \$ \_\_\_\_\_

### POCKET GUIDE

**New Ad**    **Ad Size**     Premium \_\_\_\_\_     Full Page     Half Page  
**Color**     4-Color (Cover only)     2-Color (Black + PMS 485 only)     Black/White

**Pick Up**    Pick up material from 2003 Pocket Guide    Net Rate \$ \_\_\_\_\_

Total Order Amount \$ \_\_\_\_\_

**Full payment must be received by the materials due date, September 10, 2004. See rate cards for instructions and specifications.**

**Send materials to: SEMA Show 2004 Directory, 1575 S. Valley Vista Dr., Diamond Bar, CA 91765 USA, showads@sema.org.**

**Direct production questions to Juanita Garner, SEMA, 909/396-0289, ext. 153, juanitag@sema.org.**

TERMS: Order may be amended or cancelled in writing up until the space reservation closing date, September 1, 2004. No changes or cancellations accepted after closing date. Order is accepted subject to revisions in Directory format and special feature/section availability. Artwork must be received as specified on rate card(s), or production charges will apply. All prices are NET. Show setup may be denied if invoices are outstanding. The publisher will not be bound by conditions appearing on order blanks or copy instructions that conflict with the provisions of this Insertion Order. The advertiser hereby expressly indemnified the publisher from any claims or actions arising from alleged infringement of any copyright or trademark, any libelous statements, or any unauthorized use of photographs or other illustrations that appear with the advertising referred to in this order. Advertising is restricted to exhibitors or non-industry entities. The publisher reserves the right to reject or omit any advertising for any reason. Payment must be received by September 10, 2004. Due to the nature of the publication, tear sheets will only be available at or after the Show.

Advertising Order Placed By: I am the  exhibitor / advertiser     agency

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Web Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Artwork contact: \_\_\_\_\_

Order accepted on behalf of SEMA and Performance Aftermarket Publications Inc. (PAPI) by: \_\_\_\_\_

**Space Reservation Closing Date: September 1, 2004 • Ad Materials Due Date: September 10, 2004**

Send Insertion Order with payment to SEMA Show Directory, 1575 S. Valley Vista Dr., Diamond Bar, CA 91765, fax: 909/860-0184.

### Payment Information:

Check enclosed (U.S. Dollars only, payable to PAPI) \$ \_\_\_\_\_

Credit Card \$ \_\_\_\_\_

Visa     MasterCard     American Express    Card No. \_\_\_\_\_

Exp. Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_    CVV No. (required)\* \_\_\_\_ - \_\_\_\_ - \_\_\_\_

\* Visa/MasterCard: The last 3 digits of the card number printed in the signature space on the back of the card.

American Express: The 4-digit number printed above and to the right of the raised number on the front of the card.

Cardholder Name \_\_\_\_\_

Cardholder Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_