



THE UNIVERSITY of NORTH CAROLINA
GREENSBORO

UNCG Park & Ride Advertising Request Form

Department/Org. Name	_____
Contact Name	_____
Campus Address	_____
Phone	_____ Fax _____
E-mail	_____

Ad Information

Ad Dates (First Choice): _____
(Second Choice): _____

Number of Ads: ___ 3 ___ 4 ___ 7 (Full Run)

Departmental Banner Fund to Charge: _____

Artwork Provided (check one): On Disk ___ Via E-Mail ___

Artwork Format (check one): PDF (Preferred) ___ EPS ___ PSD ___

Other Information: _____

For questions regarding billing, please contact Angie Schrock at 334-3339.

Please send completed Ad Request Form to:

Angie Schrock
Parking Operations & Campus Access Management
303 Walker Avenue Parking Deck
Campus

334-3339 phone / 334-4066 fax
awschroc@uncg.edu

Rev. 8/23/07