

Company: _____ Telephone: _____

Postal Address: _____ Cell: _____

Email: _____

Order number: _____

VAT No: _____

Product: _____ Contact name: _____

ISSUE

- | | |
|---|---|
| <input type="checkbox"/> Spring 2019 (September / October / November) | <input type="checkbox"/> Autumn 2019 (March / April / May) |
| <input type="checkbox"/> Summer 2019 (December / January / February) | <input type="checkbox"/> Winter 2019 (June / July / August) |

AGENCY: Yes No

SIZE: Full page Half page horizontal Half page vertical
 Double page spread One sixth page Other

If other: _____

COST

Price per insertion excluding VAT: _____

Position: _____

SIGNATURE

Name: _____ Date: _____

Signature: _____

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