



# World of Wellness

THE MAGAZINE FOR BALANCED LIVING

The purpose of *World of Wellness* magazine is to be a voice to promote balanced living in Central California by educating the community about healthy options for mind, body, spirit, and environment, and building awareness of the holistic businesses who offer these services locally.

**Circulation:** 25,000 readers on a quarterly basis

**Target Market:** Central Valley citizens interested in balanced living through holistic health care, natural foods, environmentally-friendly products, organic farming, clean air, clean water, fitness, and spiritual attitudes.

Issue Date	Ad Copy Due
March 20 .....	Feb. 14
June 21 .....	May 16
Sept. 22 .....	Aug. 15
Dec. 21 .....	Nov. 15

## Contact Information:

**Publisher** .....  
 Mike Neer, 559-275-3675, c/o Veda Publishing  
 4549 N. Glenn Ave. #110, Fresno, CA 93704  
 mike@worldofwellnessmag.com

**Editor** .....  
 To Submit Articles, List in Calendar, or Distribute Magazines  
 Jo Ridgway, 559-292-1562, editor@worldofwellnessmag.com

**Wellness Connections Info** .....  
 Executive Director Faye Saxton, 559-435-5640

*World of Wellness* magazine is a service of *Wellness Connections*, an organization dedicated to Health Care & Healing Arts in the Central Valley. [www.WellnessConnections.net](http://www.WellnessConnections.net)

## Policies:

- The publisher reserves the right to accept, reject, or edit any ad to meet the purpose and standard of *World of Wellness* magazine.
- Advertisers and their agents assume liability for all content (including text, representations, and illustrations) of ads printed in *World of Wellness*.
- Advertisers and their agents are responsible for obtaining the appropriate releases on any products, logos, images, or people in their advertisements.
- In no case shall the publisher be liable for the omission of any advertisement. In such event, the advertiser shall be entitled either to a refund of the amount paid or the ad will be re-scheduled to run in a later issue.
- Advertisers will be protected for duration of frequency schedule which is in effect at the time new rates are announced.

## For information on Advertising, please contact:

Rachel Frauenholz, 1-559-908-3776  
 Jo Ridgway, 1-559-292-1562  
 Mike Neer, 1-559-275-3675

## Advertising Rate Card

Effective April 2, 2011

Ad Rates:	1x	4x
<b>Color Display Ads:</b>		
Back Cover .....	\$1500 .....	\$1275
Inside Covers .....	\$1350 .....	\$1150
Full Page .....	\$1250 .....	\$1062.50
Half Page .....	\$625 .....	\$531.25
Quarter Page .....	\$310 .....	\$262.50
Eighth Page .....	\$160 .....	\$137.50

**Coupon Ads:**

New Advertiser .....	\$225
Current 1/4 or 1/8 adv. ....	\$175
Current 1/2 or Full adv. ....	\$125

**Community Resources Section:**

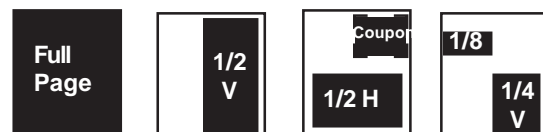
3 column-inch color ad .....	\$125
1.5 col.-inch color ad .....	\$75
Add'l. Photo/Logo .....	\$25
Line Listings .....	\$55/30 words, 50c ea. add'l.

**Calendar Listings:**

Non-Members .....	\$20
WC Members .....	2 free, then \$10 ea.

## Ad Specifications:

Size	Width	Height
Full Page .....	7-3/4" .....	9-1/2"
Half Page Vertical .....	3-3/4" .....	9-1/2"
Half Page Horizontal .....	7-3/4" .....	4-5/8"
Quarter Page Vertical .....	3-3/4" .....	4-5/8"
Eighth Page (Bus. Card) .....	3-3/4" .....	2-1/4"
Coupon .....	3-1/2" .....	3-1/2"
<i>(Coupon advertiser must provide logo, contact info, limit, &amp; expiration date in addition to artwork)</i>		
Community Resources .....	1-3/4" (1 col.) ....	1.5" / 3"



Final Trim Size is 8-1/4" x 10-1/4"

Image Area is 7-3/4" x 9-1/2"

Bleeds extend 1/4" on each side -- 8-3/4 x 10-3/4.



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## Advertising Agreement

Effective April 2, 2011

Please check the type of advertising you want to reserve:

**SIZE:**

- Full Page
- Half Page Horizontal
- Half Page Vertical
- Quarter Page
- Eighth Page (Bus. Card)
- Coupon Ad
- Column Ad in Resources
- Line Listing in Resources

**POSITION:**

- Back Cover
- Inside Front Cover
- Inside Back Cover
- Community Resources
- Best Position available

**FREQUENCY:**

- 1x
- 4x

**COLOR:** All ads, except Line Listings, are in color.

**DISTRIBUTION:** Each issue will be distributed through 150+ locations in the Central Valley over 3 months.

**PAYMENT:** Payments are made to Wellness Connections by cash, check, or credit card, and mailed or emailed to:

**World of Wellness, c/o Veda Publishing**  
 4549 N. Glenn Ave. #110, Fresno, CA 93704  
 mike@worldofwellnessmag.com

**Special Rates**

**VOLUME RATE:** The 4x rate is paid at normal rates with the discount taken on the 4th consecutive ad as follows:

- Back Cover ..... 1500 ..... 1500 ..... 1500 ... 600
- Inside Covers ..... 1350 ..... 1350 ..... 1350 ... 550
- Full Page ..... 1250 ..... 1250 ..... 1250 ... 500
- Half Page ..... 625 ..... 625 ..... 625 ... 250
- Quarter Page ..... 310 ..... 310 ..... 310 ... 120
- Eighth Page ..... 160 ..... 160 ..... 160 ..... 70

*Note: Advertisers must commit to an annual contract (4x) for the Volume Rate to apply.*

**COUPON RATE:**

- New Advertiser ..... 225
- Qtr/Eighth Pg Adv. ... 175
- Half/Full Pg. Adv. .... 125

**COMMUNITY RESOURCES RATES:**

- Column Ad  1.5 col. in. \$75  3 col. in. \$125
- Logo or Photo \$25
- Line Listing Classification: \_\_\_\_\_

Text of Listing: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

1st 30 words = \$55; # of Add'l. Words \_\_\_ x \$.50 = \_\_\_\_\_  
 Total for Line Listing = \_\_\_\_\_

**Graphics Work:** Yes, we would like some graphics work done on our ad at \$35/hr. by the publisher, VPC.  Yes

**DEADLINE.** Ad copy and payment is due by:

- Feb. 14
- May 16
- Aug. 15
- Nov. 15

**NOTE: Payments not received by deadline will result in removal from issue and loss of any discount.**

**Advertising Payment:**

- Check: Check# \_\_\_\_\_  
 Please make checks payable to: **Wellness Connections**
- Credit Card:  Amex  MC  Visa  Disc
- Account No. \_\_\_\_\_
- Expiration Date \_\_\_\_\_ CVC No. \_\_\_\_\_
- Name on Card \_\_\_\_\_

**We agree to reserve space as indicated on this page, and in accord with the policies on the current rate card:**

Company Name \_\_\_\_\_  
 Individual Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Date \_\_\_\_\_

**Distribution:** Yes, we'd like to be a Distribution Point for the issue. Please bring us this number of copies each time:  
 50  100  200  \_\_\_\_\_

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