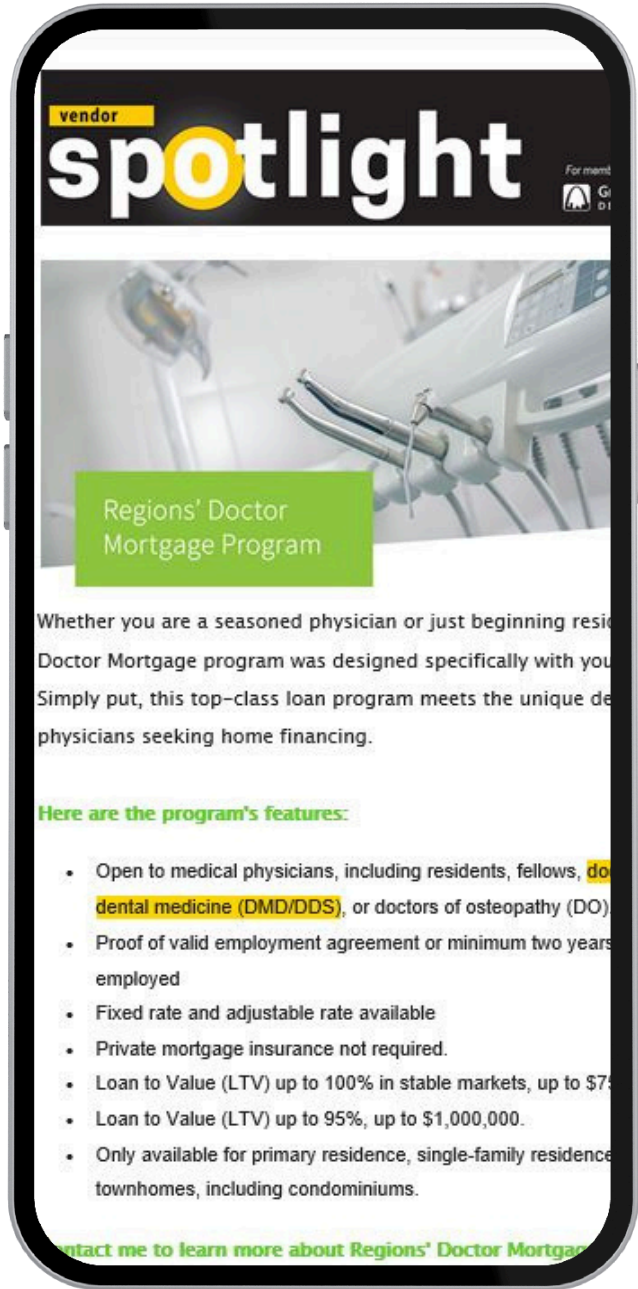


Vendor Spotlight



Showcase your product or service, announce big news, help customers use a product - it's up to you! When you purchase a Vendor Spotlight e-Blast, you get to email your company's exclusive message to our entire membership of 1000+ GSLDS member & Affiliate member dentists. Availability limited.

- **Frequency:** You get to pick your IDEAL SEND date! Coincide with a new product launch or other timely event.
- **Art Requirements:**
 - Images: .png/.jpeg. High resolution
 - Videos: Link to video already hosted on web required or mp4 file provided
 - Logos: .png preferred. High resolution
 - URL: Include a url for images/logo to link
- **Deadlines:** E-blast content must be received at least 48 hours prior to publication date and meet art requirements. Ads not received by this date, will forfeit ad spot without refund.

Vendor Spotlight Specifications



NUMBER OF SUBSCRIBERS

1,097



ANNUAL OPEN RATE

57%



SEND DATE

Your choice



PRICE PER E-BLAST

\$750



Vendor Spotlight | e-Blast to Members

--- VENDOR EMAIL OPPORTUNITY ---

Email your announcement directly to the inboxes of our 1,000+ member dentists! Each e-Blast is fully customized to your needs and can include anything including an up to 400 word message, image, logo, video, flyer...and more! Plus, you are able to pick your ideal send date! We can work with you to create an E-blast dedicated to your message. GSLDS also houses an archive of each email blast on its website greaterstlouisdentalsociety.org (accessible to members only).

e-Blast content must be received at least 48 hours prior to publication date and meet art requirements. e-Blasts are scheduled to deploy on whatever date you specify, with the caveat that we will only send one per day, so dates have to be reserved. Please complete the below form and return to nikki@stlouisdental.org or fax to 314-569-0448.

.....
ADVERTISER COMPANY NAME: _____

PRINCIPAL CONTACT: _____

Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

REQUESTED SEND DATE FOR EMAIL: _____

ADVERTISING AGREEMENT: We have read and understand the advertising terms & conditions previous page.

Signed: _____

PAYMENT METHOD: Check Visa MasterCard American Express

Total Amount Due: \$750

Card # _____

Exp. Date ____/____/____ CVV code: _____

Signature: _____
indicates approval for charges