



## L&D Degree Directory Application

Institution Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_ URL \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

### ATD L&D Degree Listing Options

Active for 12 months beginning in (Month/Year) \_\_\_\_\_

Enhanced Listing \$\_\_\_\_\_ 750.00 \_\_\_\_\_

(Social Media Integration - Video, Case Studies, LinkedIn, YouTube, etc...)

### Payment

\_\_\_\_\_ Invoice my company at the above address. I understand payment is due upon receipt of invoice.

\_\_\_\_\_ Credit Card: Email a secure online Credit Card Authorization form to: (insert name and email): \_\_\_\_\_

If paying by check, FAX signed and completed contract to MCI USA, 410-584-1998. You will receive an invoice and must MAIL check within 10 business days to MCI USA 307 International Circle, Suite 190, Hunt Valley, MD 21030.

Signature: \_\_\_\_\_

Print Name & Title: \_\_\_\_\_

Date: \_\_\_\_\_

I hereby acknowledge that I am authorized on behalf of the Client to enter this Agreement. I have read, understand and agree to the terms and conditions of this non-cancelable agreement. Acceptance of this Agreement by the Account Executive does not waive the right of the Publisher to reject any Agreement for space or Creative.