



## Classified Events Submission Guidelines

### *Natural Awakenings* New Mexico

### Magazine Classified Listing

Every edition of Natural Awakenings Magazine features a classified section that is read by thousands of people. Classified ads are \$25 for the first 25 words and \$1 per extra word. Telephone numbers count as one word.

This sample would cost \$25:

#### **RENTAL SPACE**

**TREATMENT ROOM FOR RENT** – Beautiful, private, clean room in tranquil setting. Close to downtown. Deposit required. \$600 per month. Utilities included. Call Cindy at 505-555-5555.

Chose the category for your listing:

- BUSINESS OPPORTUNITIES
- CLASSES AND WORKSHOPS
- EMPLOYMENT
- FOR SALE
- HELP WANTED
- HOUSING
- PETS
- PRODUCTS
- RENTAL SPACE
- SERVICES
- WANTED
- OTHER (Request new category)

- Keep categories centered, in alphabetical order, bolded and all caps
- Title **ONLY** should be bold and in caps (example: **TREATMENT ROOM**)
- En – Dash
- Description (example: Perfect for Massage, Facials, Acupuncture, Physical Therapy, etc. Ample parking.
- Person to contact and phone number - example: Debbie 505-222-2222.

**PAYMENT IN ADVANCE** by credit card, with credit card information called - in/faxed/mailed to *Natural Awakenings* with Classified Event submission. Your credit card statement is your receipt. (See credit card info. below). Prepayment by check must be received by the 15th of the month, prior to publication.

**Natural Awakenings Classified Listing Credit Card Billing Authorization**

Please include tax of 7.5% to total amount.

Total Amount to be charged \$ 26.88

Date Today:

PLEASE CIRCLE ONE: Visa, MasterCard, American Express, Discover, PayPal

Business Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone# \_\_\_\_\_

Contact \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration \_\_\_\_\_

Name as it appears on Credit Card: \_\_\_\_\_

Billing Address for Credit Card: \_\_\_\_\_ Zip \_\_\_\_\_

Last 3 Digits Code (from signature line on back of credit card): \_\_\_\_\_

Last 4 Digit Code for AMEX (on front of card): \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Cardholder's Signature

Print form. Provide all information requested. Fax to 888-900-6099 or email to [calendar@naturalawakeningsnm.com](mailto:calendar@naturalawakeningsnm.com).  
Deadline is the 10th prior to the month publication.