



National Tile Contractors Association
P.O. Box 13629 • Jackson, MS 39236
phone (601) 939-2071
fax (601) 932-6117 • www.tile-assn.com

Please Return Form by: June 4, 2007

2007/2008 NTCA Membership Directory and Industry Buyers Guide Non-Member Listing

Send your listing form in today – it's FREE!

Please complete this form, sign, date and return. To ensure accuracy, please clearly print or type.

PUBLISHED COMPANY INFORMATION

Company: _____

Division: _____

Address: _____

City: _____

Zip/Postal Code: _____

Phone: _____

Fax: _____

Email: _____

Web: _____

Please indicate under which letter your company should be listed

in the alphabetical sections: _____

CONTACT PERSONNEL

List key contacts and their titles. Please limit to three:

1. _____

2. _____

3. _____



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IMPORTANT!

Please provide the information to the right or your listing cannot be processed.

Please sign and return all pages of this form by June 4, 2007 in the envelope provided or fax to Bart Bettiga at 601-932-6117.

Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Fax: _____

EDUCATIONAL PROGRAMS OFFERED

DISTRIBUTORS

MANUFACTURE'S REPRESENTATIVES

BRANCHES



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Only members can request strategic placement for display ads in the membership directory.

		Color	Black and White
<input type="checkbox"/>	Spread	\$1700	\$900
<input type="checkbox"/>	Full Page	\$1000	\$500
<input type="checkbox"/>	3/4 Page	\$900	\$400
<input type="checkbox"/>	1/2 Page	\$850	\$350
<input type="checkbox"/>	3/8 Page	\$800	\$250
<input type="checkbox"/>	1/4 Page	\$700	\$200

Add your logo to the listing for only \$50

Please check box for the size of ad you would like to purchase and circle color or black and white.

PREPAYMENT REQUIRED

Please check method of payment

Check Enclosed (made payable to NTCA) Check # _____

AMEX VISA Mastercard Exp.Date _____

Card #

Authorized Signature _____ Print Name _____

Email Address for Receipt _____