



Independent Insurance Agents and Brokers of Arizona

Arizona Big I Update Broadcast Emails

Advertisement Rates and Specifications

The Arizona Big I Update (the Association’s broadcast email newsletter) accepts advertisements from Members and Associate Members of the Independent Insurance Agents and Brokers of Arizona (IIABAZ).

All advertisements are subject to approval by the IIABAZ.

Placement of an advertisement is not an endorsement, and the IIABAZ reserves the right to require this to be disclosed as a condition for acceptance of advertising agreements.

If advertisement is for an insurance product, the insurance carrier used for that program must be displayed in the advertisement. If the carrier is a non-admitted market to Arizona, that fact must be clearly disclosed in the advertisement or on your website linked to the advertisement as well.

The Arizona Big I Update is emailed twice a month via Constant Contact and distributed to its Members and Associate Members (approximately 1,200 subscribers statewide).

SPECS: Advertisements should be submitted in color to terri@iibaz.com in jpg format.

Full Ads should be 300KB or less and be a maximum of 400 wide by 500 tall. Any advertisement submitted over those specifications will automatically be adjusted and the image quality will be affected.

Half Ads should be 300KB or less and be a maximum of 400 wide by 250 tall. Any advertisement submitted over those specifications will automatically be adjusted and the image quality will be affected.

No automated (flash, streaming, etc.) banners or ads accepted. Ads may also be saved to a cd and mailed with check or completed credit card form.

All Ads may be hyperlinked to your website. Web address: _____

Advertisement prices per email are as follows:

\$250.00 Larger Full Advertisement

\$175.00 Smaller Half Advertisement

#of issues: _____ Months to Run: Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Indicate your selection: Full Large \$250 x # of Issue(s) \$ _____ Half Small \$175 x # of Issue(s) \$ _____

Company Name _____

Contact Name _____ Email Address _____

Address _____ City/State/Zip _____ Phone _____

Invoice Me Check Enclosed Payable to IIABAZ Credit Card (Visa, MasterCard, Discover and American Express)

Card Number _____ Exp. Date _____ V-Code _____ Name on Card _____

CC Billing Address _____ Signature _____

Email Address for Receipt _____

Return completed form to IIABAZ at 333 E. Flower Street, Phoenix, Arizona 85012 OR Email info@iibaz.com OR Fax (602) 468-1392 Contact 602-956-1851 or info@iibaz.com for questions.