

# Agreement

- I agree to participate in the Hudson Valley Chiropractor campaign for a minimum of 12 months.
- I further understand and agree to the following:
  - I will pay \$150 per month to my local NYSCA district.
  - My participation includes:
    - Annual membership in NYSCA
    - Name mention in a percentage of the advertising run
    - Name, location and link on the radio station(s) website

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

Print Name: \_\_\_\_\_

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