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Hospital Marketing Campaign Order Form

| ☐ Offer #1 – Customized | d Hospital Jingle Pa | <u>ckage</u> | | |
|---|--|---------------------|---|--|
| Each customized jingle p | oackage, for a one-tim | e fee of \$950.00 i | ncludes all of the following: | |
| Customized jingle for Exclusive market right Lifetime ownership Digital quality master | | • Fou • Six | residuals or royalties or to six 30-second mixes to eight 60-second mixes D's ready for broadcast | |
| Select o | ne of the eight jingles | which suit your i | marketing needs. | |
| | sten to the CD demo o | • | <u>-</u> | |
| 1. "We're the people w | · · · · · · · · · · · · · · · · · · · | | 7. "Baby Place" (maternity) | |
| 2. "New era of caring" | | | ■ 8. "The New Arrival (maternity) | |
| ☐ 3. "We'll be There" | ☐ 6. "Your p | artner in Health | ☐ 6. "Handwashing!" | |
| ☐ Offer #2 – Customized | l Hand Washing Ca | mpaign Packag | <u>e</u> | |
| Each customized hand w | ashing campaign pac | kage, for a one-ti | me fee of \$899.00 includes all of | |
| the following: | | | | |
| | | | Lifetime ownership | |
| Professional Voice Over50 each 8.5" x 11" hand was | hing posters | | No residuals or royaltiesDigital quality master for jingle | |
| | | | Broadcast quality master for video | |
| | D 6 1 10 II | 1137 D | • | |
| Offer #3 – Customized Educate, inform, and promote | | | exage your callers with a professionally- | |
| produced on-hold message. F | | | | |
| • | Digital recording Professional male or fem Background music licens | ale voice | Production of up to 4-60 second messages Digital on-hold machine (optional) ☐ Male voice or ☐ Female voice | |
| ☐ Full package with on-ho | old machine \$550 | | Monthly Rates □ \$50 per month/ | |
| ☐ Full package without or | n-hold machine \$150 | | 1 year contract | |
| Additional messages: | | | | |
| ☐ 1 Additional messages - \$25 | | | 2 Additional messages - \$50 | |
| ☐ 3 Additional messag | ges - \$75 | _ | □ 4 Additional messages - \$100 | |
| a | n <i>original jingle</i> with y | our ideas. Call us | | |
| To place your or | der, fill out the order | form and mail to | Sweetsong Productions. | |
| Name : | | | | |
| Street: | | | | |
| City: | | St: | Zip: | |
| Phone: | | | | |
| Email: | | | <u> </u> | |
| | VISA | Maginton | DISCOVER | |
| ☐ Check ☐ VIS | SA Mas | sterCard | ☐ Discover ☐ | |
| Card Number: | | | Exp. Date: | |
| Name on Card: | | | CSC Code: | |