



2019 RESOURCE GUIDE ORDER

Resource Guide 2019 Listing Order

This form reserves your color listing in the 2019 Mass-ALA *Assisted Living in Massachusetts Resource Guide*. Please return this form as soon as possible to be included in the guide.

ORGANIZATION

Residence Name: _____

Primary Contact: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

APPROVAL

I (or an authorized representative) checked our online residence listing on _____ at www.mass-ala.org and I approve the content. I understand that Mass-ALA is not responsible for content provided by me or my staff and that **all updates must be made online by 10/12/18**. If I have any urgent change requests after that date, I will contact Mass-ALA staff to see if changes can be made.

Unless I send a new photo, Mass-ALA will use the same photo that was printed in the 2018 edition.

(Signature) _____

PAYMENT METHOD (\$450 for full color listing)

if choosing bill me, payment must be received within 30 days of invoice or listing will be pulled

Check enclosed MasterCard Visa American Express

Please bill (*members only*) Corporate credit card Personal credit card

If a corporate credit card, name of company on card is _____

Card number _____

Expiration date: MM/YY _____ 3 or 4 digit card verification code _____

Cardholder name _____ Cardholder signature _____

Cardholder email address _____

BILLING INFORMATION (If not the same as organization address above)

Residence Name _____

Primary Contact _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

PLEASE RETURN BY 9/28/18

EMAIL: CGREENBERG@MASS-ALA.ORG

**MAIL: MASS-ALA, ATTN: Christina Greenberg, 465 WAVERLEY OAKS ROAD,
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Questions? Please contact Christina Greenberg at 781-622-5999 x107 or CGreenberg@mass-ala.org