

- I. Yes, I want to subscribe to **INDUMEDIA** for .... **one (1) year** ... **for only US \$ 1,300.00**
- Yes, I want to subscribe to **INDUMEDIA** for .... **6 months** ..... **for only US \$ 970.00**
- Yes, I want to subscribe to **INDUMEDIA** for .... **3 months** ..... **for only US \$ 570.00**

**2. SUBSCRIPTION DATA**

First Name:

Last Name:

Title:

Company:

Address:

City:

State:

Zip:

Country:

Phone:

Fax:

Email:

*Please type your Email address correctly and have appropriate filters removed to ensure prompt delivery*

**3. METHOD OF PAYMENT**

Please bill me for ..... US \$

Please charge my Credit Card ..... US \$

Credit Card:      Amex      Mastercard      Visa

Name on Credit Card:

Credit Card Number:

Security Code

Expiration Date: Month:      / Year:

Signature: \_\_\_\_\_

*Subscriptions are valid for one calendar year and will commence upon receipt of payment*

**4. PLEASE RETURN TO:**

**INDUMEDIA**  
c/o Latin Press, Inc.  
2455 SW 27th Avenue, Suite 200  
Miami, FL 33145  
USA  
Tel: + 305 285 3133  
Fax: + 305 285 3134