

## 2024 ASABE Guide to Consultants Advertising Deadline March 12, 2024

The *Guide* will be distributed with the 2024 May/June issue of *Resource* magazine and on our website. Readers use it as a handy reference for your services. See the current guide at <https://www.asabe.org/GuideToConsultants>

The *Guide* also reaches potential clients who contact ASABE requesting assistance to find a consultant. The *Guide* will appear on the ASABE website for approximately 12 months at no additional charge. The listing includes contact information, a 50-word description of your expertise, where you are registered, and your availability. You may also publish your business card in the *Guide*, *Resource* magazine, and the annual *Member Roster*.

Publication	Format	Cost	
<i>Guide to Consultants</i>	Listing	<b>\$95</b>	\$ _____ Attach 50-word description
<i>Guide to Consultants</i>	Business card	<b>\$95 Guide only</b>	\$ _____ Attach card
<i>Resource</i> magazine - under Professional Listings	Business card	<b>\$280</b> for all 6 issues beginning with (2024: May, Jul, Sep, Nov; 2025 Jan, Mar)	\$ _____ Attach card
<i>Member Roster</i>	Business card	<b>\$130</b> (November)	\$ _____ Attach card
<i>Resource</i> magazine	Your ad copy	See the <a href="#">Resource Media Kit</a> for separate form	
			\$ TOTAL

**Yes**, I'd like to be included. My 50-word description of expertise is attached.

**Availability (check all that apply):**      Full-time      Part-time      Domestic      International

**Registered professional engineer:**      Yes      No

If yes, indicate initial date of registration and state/province \_\_\_\_\_

List any other states/provinces where you are registered \_\_\_\_\_

### Contact Information Published in Guide Listing

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Website \_\_\_\_\_

### Payment information

Check enclosed, US funds payable to ASABE

MasterCard                      Visa

American Express              Discover

Bill Me              Bill Company P.O. \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Code \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Signature \_\_\_\_\_

For more information contact: [GuideToConsultants@asabe.org](mailto:GuideToConsultants@asabe.org)

<https://www.asabe.org/AdvertisingMediaKit>

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