

Marketing Agreement

A collecti	ive/dispensary in the st		et Marketing) and, greement discusses teri ollective.		es between	
Advertisi	ing Package:	-				
Plan:	Listing Plus	Gold Listing	Silver Listing	Bronze Listing	Other:	
Start Date:		Mont	hly Cost: \$	Term: Month to Month		
Payment	Terms:					
	: Please complete the following ization form for additional reconstructions.	=	ocument. We will attempt to p	rocess your card two times be	fore contacting you. *See credit	
	urn checks are subject to a \$50 a, CA 92627 – Attn: Weedmap		Plus, you must pay 3 months at	a time. Please mail checks to	: 2183 Fairview Rd. Ste. 101,	
			ace period allowed prior to dis payments received after 5 da		contact you during this time for	
	tent and pictures whether pro	-	race period, WeedMaps.com rethe collective. We are not resp	_	narketing services, including all or data resulting from	
		celed at any time with a 3 bus ving month, no refunds will be		monthly bill due date. Cancel	lation request received after 3	
Review P	Policy Disclosure:					
sponsored I and/or if the	isting. Reviews can only be re e decision of the WeedMaps.	emoved if the review is in clea com moderation staff that the	review is in compliance, then	om review policy. If there is r the review <u>will not</u> be remove	no evidence of a review violation	
Review "page	dding" is not allowed. Paddin	ng is when a dispensary or disp		view of the collectives own lis	ion or suspension from our site. iting. Review "padding" can resul in on a case by case basis.	
removed. I	understand that violation of suspended from Weedmaps.	review policies can result in ex	pulsion or suspension from the	e site. I also agree no refunds	ne the ability to have my reviews s will be processed for collectives ubject to recurring billing after un	
•	nry Information: nw you would like it to ap	pear on Weedmaps.com!!				
Listing Na	ame:		Listing Ph	one:		
Listing Ac	ddress:					
Listing Email:			User Prof	User Profile:		
Billing In	formation:					
Company Name:			Billing Co	Billing Contact Name:		
Billing Email:			All Invoice	All Invoices will be sent via email.		
Billing Phone:			2 nd Phone	2 nd Phone:		
Authoria	zation Signature:			Date:		