Safety Pharmacology Society Application for Use of Mailing Lists

MEMBERSHIP LIST INFORMATION

- The SPS Membership Mailing List has approximately 450 names. Please contact SPS Headquarters for the precise count at the time of your order. Total list cost $500.

ANNUAL MEETING ATTENDEE LIST INFORMATION

- SPS Annual Meeting Pre-Registrant Mailing List will be available beginning September 1, with the first delivery date of September 2 of the year of the meeting. The list costs $500 (regardless of count).

Check with SPS Headquarters for the total count within each category at the time of your order.

- Mailing list requests are usually processed within one week, but can be processed within 24 hours by special request. *(There is a $25 rush fee.)*
- A sample of the mailing for which the labels are to be used must be enclosed.
- Orders must be PRE-PAID; no purchase orders will be accepted.

MAILING LIST(S) REQUEST(S): TYPE OF MAILING LABELS:

☐ Membership List..... ☐ Pressure-sensitive* ☐ Electronic File**
USA __ Non-USA __

☐ Annual Meeting Attendee List..... ☐ Pressure-sensitive* ☐ Electronic File**
(Available beginning September 1 of the year of the Meeting) USA __ Non-USA __

☐ Combination of categories above..... ☐ Pressure-sensitive* ☐ Electronic File**
USA __ Non-USA __

** Pressure-sensitive labels will be sent via FedEx.* ☐ Bill me for shipping ☐ FedEx account number provided
Select shipping option: ☐FedEx Overnight ☐FedEx 2Day **FedEx number:** _____

** *Electronic files are formatted in Ascii or Excel and will only be sent to third-party mail house addresses. Please e-mail your third party mail house's contact name, address, telephone, fax and e-mail to spshq@safetypharmacology.org. List will be sorted by Country, then Zip Code.* **Date mailing labels are needed:** _____

AGREEMENT

I hereby apply to the Safety Pharmacology Society for a set of mailing labels of the Society's Membership and/or the Society's Annual Meeting Registrants. Enclosed is a payment for the fee. I agree not to take any action that would convey the impression that the Society is identified with a particular position, or point of view on policy or political issues, or product or service being advertised. I agree not to use the name of the Society in any way that identifies the Society with the purpose or use to which I put the mailing labels provided to me by the Society. In addition, I understand these labels are provided for ONE-TIME USE ONLY and are not to be reproduced for distribution.

Signature:_____
Printed Name:_____
Organization/Affiliation:_____
Department:_____
Address (Federal Express and U.P.S. cannot deliver to P.O. Boxes): _____
City:_____ State:_____ Zip:_____ Country:_____
Phone: (____)_____ Fax: (____)_____ E-mail:_____

PAYMENT METHOD

☐ **Enclosed is my payment to purchase the labels.**
☐ CHECK # _____ ☐AMERICAN EXPRESS ☐MASTERCARD ☐ VISA

Cardholders Name:_____ Charge Amount:_____
Card Number:_____ Exp. Date:_____
Signature:_____

Mail application to: **Safety Pharmacology Society, Mailing Lists, 11190 Sunrise Valley Drive, Suite 300, Reston, VA 20191**
E-mail: spshq@safetypharmacology.org, Fax (703) 438-3113, Telephone: (703) 547-0874 08/10