

## PRESHOW ATTENDEE LIST ORDER FORM

### CONTACT INFORMATION *(Please print or type clearly)*

EXHIBITING COMPANY

CONTACT PERSON

SHIPPING ADDRESS

CITY

STATE

ZIP

COUNTRY

PHONE

EMAIL

**All orders require a sample of the printed material to be mailed. We cannot process your order until we receive this sample.**

*Note: All orders will be processed no sooner than four weeks prior to the meeting.*

Check here if you do not plan to send out a mailing using the Preshow Attendee List.

### PRESHOW LIST COST

\$1,000 for complete list in Excel format

**Please note that for privacy reasons, the Preshow Attendee List will include name and address information, but no email addresses or phone numbers.**

### LICENSE AGREEMENT

I (We) understand and agree that this list order is for a one-time use only and is to be used only to send material herewith submitted for review by ASTRO. I (We) also agree not to duplicate, disseminate, reuse, transfer or reproduce the ASTRO mailing list, labels or e-file, or any of the information therein (collectively "Mailing List Information"), in any form whatsoever. I (We) will ensure that all members of our organization, including but not limited to, all volunteers, employees, contractors or other affiliated parties, are aware of and abide by these terms and will maintain the security of this information in accordance with industry standards, will comply with any applicable privacy laws including fulfilling data access and deletion requests, and will delete the Mailing List Information after our one-time use. If I (We) plan to share any of the Mailing List Information with a third party, such as a mail house, I (We) will require that third party agree to the terms herein and sign the Third Party Addendum provided by ASTRO for this purpose, prior to sharing any Mailing List Information with them. I (We) have indicated below the name(s) of the mail house and/or other third party(ies) we will use. I (we) understand that I (we) are only authorized to use Mailing List Information once. A separate order form must be submitted and approved before using the Mailing List Information again. If unauthorized use is detected, I (we) will be prosecuted to the full extent of the law. This agreement shall be construed and governed in accordance with the laws of the Commonwealth of Virginia. I (We) expressly consent to an injunction in the event of breach of this licensing agreement and to the exclusive jurisdiction of the federal and state courts in Fairfax County, Virginia, for any dispute concerning this licensing agreement. I (We) agree to pay reasonable attorney's fees incurred by ASTRO as a result of any breach of this licensing agreement.

I intend to use a mail house/third party.  Yes  No

I certify that I am authorized to sign this order form and License Agreement on behalf of Exhibiting Company listed above.

SIGNATURE (REQUIRED)

DATE

TITLE

If we intend to share Mailing List Information with a mail house or any other third party(ies), the name(s) and contact information are listed here:

PRINT MAIL HOUSE/THIRD PARTY COMPANY NAME(S)

MAIL HOUSE/THIRD PARTY CONTACT NAME

MAIL HOUSE/THIRD PARTY CONTACT EMAIL ADDRESS

#### QUESTIONS?

Please contact the ASTRO Meetings Department.

☎ Phone: 703-839-7390

✉ Email: meetings@astro.org

#### SUBMIT FORM TO:

✉ Email: meetings@astro.org

☎ Fax: 703-839-7391

### PAYMENT INFORMATION

An invoice with payment instructions will be sent to you 3-5 business days after receiving this form submission.