

October 1 – 4, 2023 San Diego Convention Center San Diego

PRESHOW ATTENDEE LIST ORDER FORM

Deadline: September 2, 2023

All eligible exhibiting companies that would like to receive the 2023 ASTRO Annual Meeting Preshow Attendee List must complete the following order form. Eligible exhibiting companies are defined as confirmed (paid in full) Exhibitors who are not membership based organizations. The list will be sent via email and will be in an Excel file format. For privacy reasons, name and address information will be included on the list, but no email addresses or phone numbers. Please note that per ACCME requirements, attendees will be given the option to decline to have their name and contact information on this mailing list. This may result in the final list having fewer names than previous years.

CONTACT INFORMATION

| 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 | | | | |
| New this year! Select to receive the preshow list | st generated four weeks | before the Annual Meeting | g, two weeks before or both. Please select from the following options: | |
| Preshow List (4 Weeks Before): \$1,000 | Preshow List (2 | Weeks Before): \$1,000 | Preshow List (Both 4 and 2 Weeks Before): \$2,000 | |
| LICENSE AGREEMENT | | | | |
| Organization also agrees not to duplicate, disse "Mailing List Information"), in any form whatsow will comply with any applicable privacy laws, ir use, including providing certification of such do contractors, subcontractors, including mail hou abide by these terms. If Organization plans to s agreement to the terms herein and has indicate to use Mailing List Information once. A separate detected, Organization understands that it will the Commonwealth of Virginia. Organization ex- | eminate, reuse, transfer ever. Organization furth including fulfilling data a eletion upon written red uses ("Recipients") that h hare any of the Mailing ed below the name(s) o e order form must be su be prosecuted to the fu xpressly consents to an nia, for any dispute cond | or reproduce the ASTRO more regrees that it will mainta ccess and data deletion rec quest. Organization shall lir have a need to receive such List Information with a thir f such mail house and/or of bibmitted and approved befull extent of the law. This ag injunction in the event of b cerning this licensing agree | ed only to send material herewith submitted for review by ASTRO. ailing list, labels or e-file, or any of the information therein (collectively ain the security of this information in accordance with industry standards, quests, and will delete the Mailing List Information after the one-time nit access to the Mailing List Information to those volunteers, employees, a information and will ensure that Recipients are aware of and agree to d party, such as a mail house, it will require that third party provide written ther third party(ies). Organization understands that it is only authorized ore using the Mailing List Information again. If unauthorized use is preement shall be construed and governed in accordance with the laws of oreach of this licensing agreement and to the exclusive jurisdiction of the ement. Organization agrees to indemnify ASTRO against all costs, claims, breach of this licensing agreement. | |
| I intend to use a mail house/third party. | /es 🔲 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 w | vith a mail house or any | other third party(ies), the n | ame(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 |
|--|--------------------------------------|---|
| PAYMENT INFORMATION | | |

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