

All eligible exhibiting companies that would like to receive the 2024 Multidisciplinary Head and Neck Cancers Symposium Postshow 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		
	<b>A</b>		
	· · · · · · · · · · · · · · · · · · ·		nted material to be mailed.
			TIL WE RECEIVE THIS SAMPLE.
	Note: All orders will be pr	ocessed within four week	s after the conclusion of the meeting.
	□ Check here if you do no	t plan to send out	a mailing using the Postshow Attendee List.
	Check here if you do no	t plan to send out	a mailing using the Postshow Attendee List.

## LICENSE AGREEMENT

Organization understands and agrees 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. Organization also agrees 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. Organization further agrees that it will maintain the security of this information in accordance with industry standards, will comply with any applicable privacy laws, including fulfilling data access and data deletion requests, and will delete the Mailing List Information after the one-time use, including providing certification of such deletion upon written request. Organization shall limit access to the Mailing List Information to those volunteers, employees, contractors, subcontractors, including mail houses ("Recipients") that have a need to receive such information and will ensure that Recipients are aware of and agree to abide by these terms. If Organization plans to share any of the Mailing List Information with a third party, such as a mail house, it will require that third party provide written agreement to the terms herein and has indicated below the name(s) of such mail house and/or other third party(ies). Organization understands that it is 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, Organization understands that it 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. Organization expressly consents to an injunction in the event of breach of this licensing agreement and to the exclusive jurisdiction of the federal and state courts in Arlington County, Virginia, for any dispute concerning this licensing agreement. Organization agrees to indemnify ASTRO and the meeting c

l intend to use a mail house/third party.

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.

**SUBMIT FORM TO:** 

Email: meetings@astro.org

Phone: 703-286-1568 Email: meetings@astro.org