

Advanced Practice uroLogic Conference March 21-23, 2019– Chicago, IL

LIST OF ATTENDEES ORDER FORM

Please send us the list of attendees from the SUNA Advanced uroLogic Conference. We understand that the cost of \$250 must be *prepaid* before receipt of the list. All list rentals are subject to approval by SUNA which approval may be withheld for any reason or no reason in the sole discretion of SUNA. *Please note: that email addresses are not included in this list.* A sample of the mailing piece is required to process the list order and must accompany your list order request.

accompany your list order reques	t.		
Email File to Email address:			
February 19	February 26	March 5	March 12
We understand that the list is for one Advanced uroLogic Conference. T requested.			
TOTAL AMOUNT ENCLOSED	\$		SUNA Tax ID No. 93-0696206
Exhibiting Company:			
Contact:		Title:	
Signature:		Date:	
Full Payment by Credit Card			
Visa MasterCard A	AMEX		
Name on Credit Card			
Credit Card Number			
Security Code	Exp Date		
Charge Amount			
Credit Billing Address street #	zip code		
Signature			

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