



uroLogic Conference
September 20-23, 2019 – Lake Buena Vista, FL
List of Attendees Order Form

LIST OF ATTENDEES ORDER FORM

Please send us the list of attendees from the SUNA uroLogic Conference. We understand that the cost of \$300 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.*

Email File to Email address:

August 16

August 23

August 30

September 6

We understand that the list is for **one-time** use only. It is offered for sale only to exhibitors at the 2019 uroLogic Conference. The list will be delivered to you **after** the Conference unless otherwise requested.

TOTAL AMOUNT ENCLOSED \$

SUNA Tax ID No. 93-0696206

Exhibiting Company:

Contact:

Title:

Signature:

Date:

Full Payment by Credit Card

Visa
 MasterCard
 AMEX

Name on Credit Card _____

Credit Card Number _____

Security Code _____ Exp Date _____

Charge Amount _____

Credit Billing Address street # _____ zip code _____

Signature _____

Heidi Perret, Marketing Coordinator
Society of Urologic Nurses and Associates, Inc.
 East Holly Avenue / Box 56
 Pitman, NJ 08071-0056
 856-256-2375 / Fax 856-589-7463
 heidi.perret@ajj.com