



28th Annual Convention  
 September 26-29, 2019  
 Chicago, IL

**LIST OF ATTENDEES ORDER FORM**

Please send us the list of attendees from the Academy of Medical-Surgical Nurses (AMSN) 2019 convention. We understand that the cost of \$500 must be **prepaid** before receipt of the list. All list rentals are subject to approval by AMSN which approval may be withheld for any reason or no reason in the sole discretion of AMSN. **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.**

Send us a registrant list for the AMSN 2019 Convention. Enclosed is a sample of our mailing piece.

Email address:

**August 23**                      **August 30**                      **September 6**                      **September 13**  
 Upon Final Wrap-Up (2 Weeks Following the Meeting)

(AMSN Tax ID #: 22-3141758)

<b><u>Full Payment by Credit Card</u></b>		
Visa	MasterCard	AMEX
Name on Credit Card		
Credit Card Number		
Security Code	Expiration Date	
Charge Amount \$		
Credit Billing Address street #	zip code	
Signature		

We understand that the list is for **one-time** use only. **All orders must be prepaid.** Exhibitor agrees to use the list one-time only per the sample piece submitted. Exhibitor agrees not to merge the list of attendees into any database. Further, exhibitor agrees to erase all data and destroy the electronic information upon completion of this approved mailer.

Company:

Address:

City:

State:

Zip:

Telephone:

E-mail:

Contact:

Title:

Signature:

Date

Any questions about the list and all correspondence should be directed to:

Heidi Perret

[heidi.perret@ajj.com](mailto:heidi.perret@ajj.com) / phone:856-256-2375 / fax: 856-589-7463