



INSTRUCTIONS FOR ORDERING NAMSS MAILING LABELS

Thank you for your interest in a NAMSS list rental. NAMSS may sell its mailing list to certain organizations that offer products and services of interest to the membership.

1. All list rental requests must be in writing.
2. Sample mail piece specifying the product or service to be promoted and letter from the requestor defining the purpose of the mailing must be included prior to approval.*
3. Request shall be limited to a one-time use only for the product or service approved. The list renter shall not copy, store, or reproduce the rented list. Any subsequent unauthorized mailings will be billed and if continued, legal action may be taken.
4. Payment must be made prior to receiving labels.
5. The full membership list can be purchased at a cost of \$850 for nonprofit organizations and \$1,250 for profit organizations.
6. Partial list agreements may be purchased for \$.65 per name. Please note that there is a minimum \$250 charge for any mailing list orders.
7. NAMSS will exchange lists with nonprofit associations without charge when NAMSS also desires use of the nonprofit association's list and the lists or list segments of similar size.
8. Mailing list will be sent electronically to user. **Mailing lists do not include email addresses.**

Anyone wishing to rent the NAMSS mailing list must sign the following statement and return the form to NAMSS, along with a sample mailing. NAMSS must approve your mailing sample before your list request will be processed.

I, the undersigned, understand that the NAMSS mailing list is to be used only for the purpose stated, and only with materials previously submitted to, and approved by NAMSS. I agree not to reproduce or store the list, in whole or in part, without the express consent of NAMSS.

Signature of authorized representative

Date

*Job postings cannot be considered for a mailing list rental.
To post a job, please visit <http://careers.namss.org/>.

Contact Information

Name: _____

Company: _____

Address: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

Please check the choices below that apply to your order:

Type of Mailing:

Mailing Addresses

Content:

Entire List

Partial List – Please Specify: State Designation Position
 Certified-Only

Payment Information

Check enclosed for total payment of \$_____ Check # _____

Please charge my credit card in the amount of \$_____

Credit Card Payments may be completed securely over the phone by calling the NAMSS Executive Office at (202) 367-1196. **Please do not include payment information on this form for your own security.**

Please return form and payment to:

NAMSS
8658 Solution Center
Chicago, IL 60677-8006