

Society of Toxicologic Pathology Application for Use of Mailing Lists

MEMBERSHIP LIST INFORMATION

• The STP Membership Mailing List has approximately 800 names. Please contact STP Headquarters for the precise count at the time of your order. Total list cost \$500.

ANNUAL MEETING ATTENDEE LIST INFORMATION

• STP Annual Meeting Pre-Registrant Mailing List will be available beginning June 1, with the first delivery date of June 2 of the year of the meeting. The list costs \$300 (regardless of count).

Check with STP Headquarters for the total count within each category at the time of your order.

- Mailing list requests are usually processed within one week, but can be processed within 24 hours by special request. (There is a \$25 rush fee.)
- A sample of the mailing for which the labels are to be used must be enclosed.
- Orders must be PRE-PAID; no purchase orders will be accepted.

MAILING LIST(S) REQUES	TT(S): TYPE OF MAILING LAB	ELS:		
☐ Membership List		Pressure-sensitive	☐ Electronic File	**
		USA	Non-USA	
☐ Annual Meeting Attendee	List	Pressure-sensitive	☐ Electronic File	**
(Available beginning June 1 of th	e year of the Meeting)	USA	Non-USA	
☐ Combination of categories	above	Pressure-sensitive	Electronic File	**
		USA	Non-USA	
	ll be sent via FedEx. ☐ Bill me f Ex Overnight ☐FedEx 2Day			
AGREEMENT I hereby apply to the Society of To Registrants. Enclosed is a payment position, or point of view on policy identifies the Society with the purp provided for ONE-TIME USE ON	e needed: xicologic Pathology for a set of mailing later for the fee. I agree not to take any action or political issues, or product or service lose or use to which I put the mailing laber LY and are not to be reproduced for district.	abels of the Society's Member that would convey the impres being advertised. I agree not to its provided to me by the Social bution.	rship and/or the Society's ssion that the Society is o use the name of the So ety. In addition, I unders	identified with a particular ociety in any way that stand these labels are
Duinte I Manne				
Organization/Affiliation:				
Department:	PS cannot deliver to PO Roves):			
City:	P.S. cannot deliver to P.O. Boxes):State:Fax: ()	Zip:	Country:	
Phone: ()	Fax: ()	E-mail:_		
PAYMENT METHOD	to munch one the labels			
☐ Enclosed is my payment t	☐ AMERICAN EXPRESS	□MASTERC	ARD	□VISA
				_
Card Number:		Charge Amount:Exp. Date:		
Cara Nulliber.	ard Number: Exp. Date:			

Mail application to: Society of Toxicologic Pathology, Mailing Lists, 1821 Michael Faraday Drive, Suite 300, Reston, VA 20190 E-mail: stp@toxpath.org, Fax (703) 438-3113, Telephone: (703) 438-7508