Biophysical Society



Annual Meeting Attendee Mailing List Contract

Company Information			
Company Name:			
Contact Name:	Title:		
Address:			
City:	State:	Postal Code:	Country:
Contact Phone:	Fax:	E-mail:	
Signature:			
By signing this form, I understa for review with this form.	and and agree that this list orde	er is for a one-time use only and is to be	e used only to send material submitted
Selection Requeste	d: Pre-Meeting List*	Post-Meeting List*	
	ALL US Only	US & Canada Only Inter	national Only
Exclude: Students _	Exhibitors		
		will be available beginning December 2, ist will be available beginning April 6, 20	
For exact count	_	chibits Manager at 240-290-5609 or exh	
	-, p	gg	
Please supply the contact inform	mation for a third-party mail ho	buse. Lists cannot be sent directly to a co	mpany requesting a list.
Mail House	Contact Name		
	Phone		
Please note: All lists will be sent	t to the third-party mail house i	in Excel format unless otherwise noted. I	No email addresses are included.
Total Price			
# of Attendees		x \$.35 per name = \$	USD
(Minimum \$350 or 1,000 name	25.)		
Method of Payment			
Check (Payable to Bio	physical Society – US currency of	drawn on US bank. No Purchase Orders a	accepted.)
Credit Card			
Card Type (check one)	: □ MasterCard □ Visa	☐ Discover ☐ American Express	
Credit Card Number:			
Expiration Date:	/ CVV Numbe	r:	
Name as it annears or	i caro.	Signature:	

Please allow 7–10 business days for processing.

Return form to the Sales & Exhibits Manager at exhibits@biophysics.org.