



MAILING LIST ORDER FORM

SLEEP 2017 | 31st Annual Meeting of the Associated Professional Sleep Societies, LLC
Hynes Convention Center | Boston, MA | June 3-7, 2017

Please complete this form and attach a sample of your mailing(s). Upon receipt of your mailing pieces, completed order form and agreement (including payment, shipping information, and signed mail house agreement form if applicable), the APSS will review your application. Use of the SLEEP 2017 mailing list is contingent upon approval of the mailing piece. Please allow 5-7 business days for processing.

The SLEEP 2017 Mailing List Order Form will NOT be reviewed unless the order form and rental agreement(s) are complete, signed, and attached. A sample of the mailing piece must be included.

1. ORDER INFORMATION

Pre-meeting mailing
(Deadline April 26, 2017)

Post-meeting mailing
(Deadline August 1, 2017)

Order Date: _____ Company: _____

Contact: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____ Country: _____

Telephone: _____ Fax: _____ Email: _____

Description of materials to be mailed: _____

2. LIST DETAILS

LIST FORMAT:** (\$0.30; \$300 min. order)

Geographic Preference

All Geographic Locations United States Canada/Mexico International

List Sequence

Zip Code Alphabetic by Last Name

Adhesive Labels (peel and stick)

Mailing labels are sequenced according to zip code and mailed to address above.

Email (Excel spreadsheet of **mailing addresses** sent to a bonded third-party mail house **ONLY**.)

Email address of mail house contact person: _____

**For security purposes, it is required that the mailing list be mailed or emailed to an established bonded third-party mail house. The mailing list order will not be processed unless the attached Mail House Agreement is completed and signed by a representative at the mail house. If the list renter purchases adhesive labels and attests that they will apply them to the pre-approved mail sample, then the list can be sent directly to the renter.

3. SHIPPING INFORMATION

SHIP TO:

Ship to the address provided on the previous page (by selecting this choice the list renter attests that they will apply the mail list labels – adhesive format only – to the pre-approved mail sample only).

Ship to the below address (bonded third-party mail houses only; Mail House Agreement must be completed and signed).

Company: _____

Mail House Representative: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____ Country: _____

Telephone: _____ Fax: _____ Email: _____

PAYMENT: *(complete this section for label orders only)*

All label orders will be shipped at the renter's expense via their choice of Federal Express (FedEx) or United Parcel Service (UPS). Orders will be sent using 2nd day service unless otherwise indicated below. Please provide your FedEx or UPS account number if you wish to have shipping costs charged directly to your account.

FedEx Account Number: _____

UPS Account Number: _____

Shipping Method *(if other than 2nd day service)*: _____

4. PAYMENT *(prepayment by check or credit card is required)*

Appropriate Payment Amount*: _____

*Exact payment amount will be based on the number of addresses included in the ordered list in addition to any applicable shipping charges (unless the list is delivered via e-mail or a FedEx or UPS account number is provided along with the order).

Check made payable to the APSS

CHECKS WILL NOT BE ACCEPTED UNLESS THEY ARE MADE IN U.S. FUNDS DRAWN ON A U.S. BANK.

Credit Card

Please charge (Grand Total): \$ _____

To my (check one) Visa MasterCard American Express

Card Number: _____

Expiration Date: _____ Validation Code*: _____

Name on Card: _____ Signature: _____

*FOR VISA OR MASTERCARD, THE VALIDATION CODE IS THE LAST THREE DIGITS IN THE SIGNATURE BOX. FOR AN AMERICAN EXPRESS, THE VALIDATION CODE IS THE FOUR NUMBERS ABOVE THE CREDIT CARD NUMBER.

**CONTACT US WITH ANY
ADDITIONAL QUESTIONS**

or to get a quantity/pricing quote

APSS Meeting Department
Attn: SLEEP 2017
2510 North Frontage Road
Darien, IL 60561

Phone: (630) 737-9700
Fax: (630) 737-9789
Email: sleepmeeting@sleepmeeting.org



MAILING LIST RENTAL AGREEMENT

SLEEP 2017 31st Annual Meeting of the Associated Professional Sleep Societies, LLC
Colorado Convention Center | Boston, MA | June 3-7, 2017

This Agreement is made on the _____ day of _____ in the year _____ between the Associated Professional Sleep Societies, LLC (APSS) and _____ (List Renter). In consideration of the covenants and terms contained herein, the parties hereby agree as follows:

The SLEEP mailing list will not be provided for the following purposes:

- Solicitation for membership to any organization or group.
- Announcement or solicitation for attendance at any educational program other than approved activities occurring in conjunction with the SLEEP 2017 meeting.

Agreement is subject to the following conditions:

- List Renter agrees that in utilizing the SLEEP mailing list, he/she will not disclose, transfer, duplicate, reproduce, or retain any portion of the list in any form.
- Agreement stipulates a one-time use of the mailing list provided by the APSS for the purpose stated in the Mailing List Order Form.
- List Renter agrees to reimburse the APSS for all costs that the APSS may incur in enjoining unauthorized parties from using the list in all cases where such unauthorized parties gained access to the membership through the renter listed above or any of the renter's agents or employees.
- List Renter agrees that the APSS will have the right to monitor use of the mailing list.
- List Renter agrees that at least ten (10) days prior to receiving the mailing list from the APSS, he/she will forward to the APSS copies of all materials that will be mailed to the names on the obtained mailing list. The APSS has the absolute right to deny rental of the list based on a review of the materials.
- The APSS may not be cited in any promotional materials.
- Advertisements may only pertain to booth space and Industry Supported Events. Industry Supported Events should only advertise the Industry Supported Event that is held in conjunction with SLEEP 2017.

The parties have executed this Agreement as of the day, month and year first written above.

Signature below indicates complete acceptance of the above conditions and constitutes a contract between the APSS and List Renter.

List Renter Printed Name: _____

List Renter Signature: _____

**CONTACT US WITH ANY
ADDITIONAL QUESTIONS**

or to get a quantity/pricing quote

APSS Meeting Department
Attn: SLEEP 2017
2510 North Frontage Road
Darien, IL 60561

Phone: (630) 737-9700
Fax: (630) 737-9789
Email: sleepmeeting@sleepmeeting.org



MAILING LIST MAIL HOUSE AGREEMENT

SLEEP 2017 | 31st Annual Meeting of the Associated Professional Sleep Societies, LLC
Hynes Convention Center | Boston, MA | June 3-7, 2017

Subject to a separate agreement, the APSS has granted _____ (List Renter)
a non-exclusive License for the use of the SLEEP 2017 mailing list.

This Agreement is made on the ____ day of _____ in the year _____ between the Associated
Professional Sleep Societies, LLC (APSS) and _____ (Mail House).

In consideration of the covenants and terms contained herein, the parties hereby agree as follows:

Mail House acknowledges the following:

- The SLEEP 2017 mailing list is confidential, is the sole exclusive property of the APSS, and is protected by United States Copyright, Trade Secret and other laws.
- The APSS does not grant to Mail House or to any other person or organization use of the SLEEP 2017 mailing list to create or update any mailing lists or databases or for any purpose other than that which may be set forth in the separate agreement between the APSS and List Renter.

This agreement is subject to the following conditions:

- Mail House is hereby granted permission to assist List Renter in use of the License granted by the APSS to the List Renter.
- Mail House agrees to use the License and the SLEEP 2017 mailing list only subject to the terms of this Agreement and the APSS agreement with List Renter.
- Mail House agrees not to make, sell, use, re-use, reproduce, make available to others, distribute, disclose, or otherwise utilize the SLEEP 2017 mailing list or information contained therein.
- In the event that Mail House violates any term of this Agreement, Mail House agrees that the APSS shall be entitled to recover costs, damages, and attorney's fees occasioned by actions to enjoin violation of this Agreement and in pursuing damages and any other relief. It is the specific intent of the parties that the court has jurisdiction and authority under this License Agreement to award all available relief including each element of the foregoing.

The parties have executed this Agreement as of the day, month and year first written above.

Signature below indicates complete acceptance of the above conditions and constitutes a contract between the APSS and Mail House.

List Renter Printed Name: _____

List Renter Signature: _____

Mail House Representative Printed Name: _____

Mail House Representative Signature: _____

**CONTACT US WITH ANY
ADDITIONAL QUESTIONS**

or to get a quantity/pricing quote

APSS Meeting Department
Attn: SLEEP 2017
2510 North Frontage Road
Darien, IL 60561

Phone: (630) 737-9700
Fax: (630) 737-9789
Email: sleepmeeting@sleepmeeting.org