

Mailing List Order Form

Please note: ASE mailing lists are physical mailing addresses only and DO NOT INCLUDE email addresses.

All orders must be accompanied by a copy of what is being mailed for approval, along with payment, before mailing list order will be processed. ASE retains the right to deny requests for any reason.

All lists are provided via email in excel format in zip code order.

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- o ASE Members North America and International
- o ASE Members in US Only
- All ASE Physicians
- o All ASE Sonographers
- All ASE Physicians in US Only

Pricing

\$275/1000 names for nonmembers, \$200/1000 names for ASE member FOR BOTH: \$20 per geographic selection (country, state, region, zip codes, etc)

There is a 1000 name minimum for all orders

Customer Information * Required fields
Name*
Address*
Phone* Email*
Payment Information Rush Order?
Method of Payment (choose one): add \$75
Check (Make payable to ASE)
MasterCardVISAAmerican Express
_ASE is providing CME for my course. This list is complimentary!
Card #
Exp. Date Security CodeAmount to be charged \$ Name as it appears on the card
Signature of Cardholder
Please send orders to: American Society of Echocardiography, Attn: Natalie Costantino, 2530 Meridian Parkway, Suite 450, Durham, NC 27713. Or email to ncostantino@asecho.org.
ASE Federal Tax ID Number: 31-0899106
Please allow three weeks processing time for all orders once received by the ASE office.
Agreement: The names and addresses provided by ASE are the property of ASE and are supplied for the specific mailing ordered and

for no other purpose. After completion of such mailing, any files shall be destroyed or erased and will not be used for any other purposes. It is understood that this list is solely provided for a one-time use only. Any unauthorized use is strictly prohibited.

Signature of Acceptance of Rental Terms ______ Date_