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Label Order & Use Agreement Form

The ASTD-TCC mailing list consists of approximately 800 chapter members who are training and development professionals from large and small businesses, organizations, government offices and independent consulting agencies throughout the Twin Cities.

To request labels, follow the steps outlined below. You must complete all information. Payment must accompany your request. If you have any questions, please contact the ASTD-TCC office.

Approval & Standards

ASTD-TCC reviews each mailer before the request is approved. ASTD-TCC reserves the right to decline any label order that does not meet with its approval.

To receive approval, the following criteria must be met:

1. A sample mailer (a rough draft or letter of explanation will do) must accompany the request.
2. The mailer and the offer must comply with applicable laws and postal regulations.
3. The mailer may not carry any mention of, or endorsement by, ASTD-TCC without prior approval.
4. The mailing must be for the direct benefit of only the purchasing company, unless prior approval has been given.

Processing

In most cases, labels are shipped within five (5) working days unless special arrangements are made prior to ordering. ASTD-TCC will e-mail an electronic file directly to your mail house. Please provide the following information:

Mail House Contact

Mail House E-mail Address

Subject Line *(for ASTD-TCC's use when sending list to mailhouse)*

Format & Sort

Labels are pre-printed with a maximum of five (5) lines per label. Please specify your sorting preference below *(if no preference is checked, labels will be sent in alphabetical order).*

- Sorted by zip code
 Sorted alphabetically by last name

Costs & Payment

The charges quoted are per use and must be paid in advance.

ASTD-TCC Member Price: \$300.00

Nonmember Price: \$500.00

Note: ASTD-TCC may make trade arrangements or allow discounted rates for its mailing list with other professional associations or nonprofit organizations. All requests are approved by the ASTD-TCC Board of Directors or Executive Committee prior to shipping.

Agreement

You must sign the following agreement for your order to be processed:

I agree that the labels or electronic (e-mail) file provided to my company by ASTD-TCC are for one time use and only for the purpose listed on this form. I further agree that they will not be duplicated, reused, sold, or provided to another party for any purpose.

Signature Date

Name (please print or type)

Title

Company

Address

City State ZIP

Phone

Fax

E-mail

Payment Options:

Amount Enclosed: \$ _____

- Check (payable to ASTD-TCC)
 VISA MasterCard
 American Express Discover

Card Number Expiration Date

Name of Cardholder 3-digit security #

Authorized Signature

*Please mail your request, sample mailer and payment to:
ASTD-TCC, 1000 Westgate Drive, Suite 252, St. Paul, MN 55114
Or fax to: 651-290-2266*