



ASSOCIATION OF COLLEGIATE SCHOOLS OF ARCHITECTURE

MAILING LIST ORDER FORM

Restrictions/Conditions

Lists are for one-time use only. Lists may not be duplicated. Lists for follow-up mailings must be ordered separately. A sample of the mailing piece(s) must be sent with this signed Rental Agreement for the approval of ACSA.

Shipping Charges

Lists are emailed or shipped via Fedex within 14 business days after approval. Emailed lists incur no additional shipping charges. Shipments of labels will incur a \$15.00 handling fee plus the cost of label materials.

Rental Agreement

List requests will not be processed without all of the following: pre-payment or institutional purchase order, signed rental agreement, and sample piece(s). Send required materials to:

ACSA

1735 New York Ave. NW, Washington, DC 20006
or fax to ACSA at: (202) 628-0448.

or Email to:

Danielle Dent, Membership Manager
ddent@acsa-arch.org

LIST TYPE AND COST PER ADDRESS	MEMBER RATE	NONMEMBER RATE
ACSA Administrators (Deans, Directors, Heads, Chairs-select entire list or one per school)	\$0.35 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
ACSA Faculty (All Full/Part-time Faculty: US & International; approx: 6300)	\$0.35 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
ACSA Faculty Councilors (ACSA Liaison for member schools; one per school; approx: 137)	\$0.35 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
ACSA Domestic Affiliate Schools (One Head Contact per school)	\$0.35 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
ACSA International Affiliate Schools (One Head Contact per school)	\$0.35 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
Special Select Lists (Can select contacts by state, region, course interests)	\$0.50 <input type="checkbox"/>	\$0.65 <input type="checkbox"/>

NOTE: ALL LISTS FROM ACSA ARE FOR ONE-TIME USE ONLY

Sort Type: Alphabetical Zip code

Acknowledgment of Terms

We acknowledge that the names and addresses provided to us are the property of the Association of Collegiate Schools of Architecture and are supplied for the specific, one-time use indicated below and will in no other manner be transferred to any other person or concern for any purpose. We further agree that such use will be executed within four (4) weeks from receipt, otherwise the list is considered out-of-date and its use will violate agreement. We agree that permission to use the lists constitutes neither approval nor endorsement by or of any product or service offered. We agree to the rental agreement and charges as stated above.

Contact Name:

Company:

Address:

City, State, Zip:

Email: Tel:

Ship List to: Address:

City, State, Zip:

Specific use of requested list(s):

Amount of payment:

Signature:

PAYMENT INFORMATION:

Name on credit card:

Billing Address (if different from above)

Credit Card Number:

Expiration Date: CCV Number: