



**AKAPTA MAILING LIST ORDER FORM**

**Order our current AKAPTA mailing list for \$150.  
This list does not contain email addresses – mailing addresses only.  
List will be sent electronically as an Excel file.**

Name:	
Organization Name:	
Phone:	E-mail:
Address:	

**Method of Payment:** NOTE – PLEASE DO NOT EMAIL OR FAX CREDIT CARD INFORMATION. CONTACT US AT (800) 999.2782 EXT 8562

<b>Total Payment:</b> \$ _____	
<b>Check Enclosed</b> (Payable to Alaska Chapter, APTA)	
<b>Credit Card:</b> <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> Discover	
Credit Card #:	Expiration:
Cardholder's Name:	Signature:
Billing Address Zip Code:	

**Mailing List Agreement:**

This acknowledges that the mailing list and any portions thereof are the exclusive property of the Alaska Chapter, APTA. I agree and understand that all names and addresses furnished are provided for a one-time use only. I guarantee the names and addresses shall not be copied, reused, sold, electronically reproduced or used by any party except as specified in the written order.

**There is a NO RETURN POLICY on all mailing list orders.**

Please read the Mailing List Agreement above prior to signing. All order forms must be signed. The undersigned has read and hereby agrees to observe all policies and regulations set forth in the contract for purchasing the mailing list from the Alaska Chapter, APTA as described.

**To complete your submission, you must make the following certification by checking the "I agree" box below:**

**I AGREE**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_