The Pennsylvania Speech-Language-Hearing Association

PSHA: 700 McKnight Park Drive, Suite 708, Pittsburgh, PA 15237 • tel: 412-366-9858 • fax: 412-366-8804
website: www.psha.org • email: PSHA@psha.org

PSHA MEMBERSHIP MAILING LIST REQUEST

PSHA membership mailing lists are available for purchase from the PSHA Office for use in mailing materials related to the speech-language pathology and/or audiology profession. The listing includes all members in good standing at the time of printing.

TERMS AND CONDITIONS

The undersigned agrees to use the labels/listing provided each time for ONE MAILING ONLY. The undersigned will not give or sell the names on the labels/listing to any other individual, association, corporation or similar entity.

_____

Authorized Signature

contact information

Name of Organization/Company: _____

Contact Name: _____

Address: _____

Phone #: _____

Fax #: _____

Email: _____

request/costs

Check all that apply:

- ❑ Entire Database (approx. 1,500)
- ❑ Exclude Students
- ❑ Alphabetical Order
- ❑ Zip Code Order

Method of Return:

- ❑ Peel/stick labels
- ❑ Disk
- ❑ Electronically (e-mailed - tab-separated text file)

Cost:

- ❑ $.10 per name
- ❑ $15 handling for e-mail/disk
- ❑ $15 postage/handling and cost of the labels

method of payment

Make check payment to "PSHA" or your choice of credit card. Please check payment method and complete account information.

❑ Visa ❑ MasterCard ❑ Check (payable to PSHA) ❑ Send Invoice

X _____
YOUR SIGNATURE

CREDIT CARD ACCOUNT NUMBER

EXPIRATION DATE

Please allow 10 working days for processing of request.