



AAOMS MAILING LIST ORDER FORM

The following information must be included with this form or it will delay your order

- _____ Check or Credit Card Payment to AAOMS for amount of the list
- _____ Educational Inst. must submit a purchase order if payment cannot be issued at time of order
- _____ Credit Cards: VISA or Master Card
- _____ Written request to AAOMS Headquarters with the stated purpose
- _____ A copy of the mailing piece, may be in draft form

The above items and the completed Mailing List Order Form should be forwarded to AAOMS, 9700 West Bryn Mawr Avenue, Rosemont, Illinois 60018, Attn.: Membership Services Department Telephone: 800/822-6637, ext. #4344 or #4378, Fax: 847/678-6279.

- You Are: _____ AAOMS Fellow/Member/Resident Member
 _____ AAOMS Staff
 _____ Exhibitor
 _____ Institutions (Hospitals and Universities)
 _____ Regional and State Societies

AAOMS does not release member e-mail addresses, telephone numbers, or fax numbers for any purposes

Date Requested: _____ Date Required: _____ Date Completed: _____

Print or Type:

Name: _____ Title: _____
 Company: _____
 Address: _____ Email: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: _____ Fax: _____

Select Media Type (✓) & note number of Set (s) requested:

- _____ Excel Spread Sheet (One Time Use/Provide E-mail address above)
- _____ ASCII-Comma Delimited (One Time Use/Provide E-mail address above)

Sort Order: Alphabetical Zip Code State District

Check Membership Status' to Include:

Note * = Active Practicing OMS's

Number in parentheses indicate the number of names for that category as of January 1, 2009

- | | |
|---|------------------------------|
| _____ Affiliate Members - Foreign * (260 Names) | _____ Candidates * (300) |
| _____ Fellows/Members * (4,650) | _____ Resident Members (980) |
| _____ Federal Service Fellows/Members * (205) | _____ Inactive Members (10) |
| _____ Provisional Fellows/Members * (75) | _____ Honorary Fellows (20) |
| _____ Life Fellows/Members * (720) | _____ Pre-Reg. Mtg. List |
| _____ Retired Fellows/Members (1,150) | _____ Post-Reg. Mtg. List |
| _____ Other: _____ | |

Please complete this section:

Visa Mastercard Check/Check #: _____ Amount Paid: _____

Credit Card #: _____ Expiration Date: _____

Card Holder's Signature: _____

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Select Location:

_____ United States Only
_____ United States and Canada Only
_____ United States and Foreign (Includes Canada)
_____ Foreign Only (Includes Canada)
_____ Selected States Only: _____
_____ District I = CT, ME, MA, NH, NY, RI, VT
_____ District II = DE, DC, MD, NJ, PA
_____ District III = AL, FL, GA, KY, LA, MS, NC, PR, GUAM & VI, SC, TN, VA, WV
_____ District IV = IL, IN, MI, OH, WI
_____ District V = AR, CO, IA, KS, MN, MO, MT, NE, NM, ND, OK, SD, TX, WY
_____ District VI = AZ, CA, HI, ID, NV, OR, UT, WA, AK

Mailing List Prices:

Entire Membership	\$700.00
1 District	\$300.00
1 State	\$200.00
List of Residents	\$50.00
Pre-Reg. Annual Mtg. List	\$350.00
Post-Reg. Annual Mtg. List	\$475.00

As approved by the AAOMS Board of Trustees, each State and Regional OMS Society are allowed up to two (2) sets of mailing lists per calendar year at no charge. Additional sets may be purchased but will be charged the regular price. Residents may purchase a mailing list at a reduced fee.

PLEASE ALLOW TWO WEEKS FOR PROCESSING.

Mailing List Policy:

A general membership mailing list and a list of specific meeting registrants may be provided for a fee to fellows, members, candidates and residents, regional and component OMS societies, educational institutions, exhibitors, peer partners and non-members in accordance to the following:

1. Mailing lists are protected by copyright and shall not be duplicated without written permission of the Executive Director of AAOMS.
2. Oral and Maxillofacial Surgery institutions, fellows and members who sponsor courses for a profit and who wish to announce them to the membership will be charged the exhibitor/commercial fee for a mailing list.
3. Fellows and Members who wish to conduct a scientific survey of the membership may purchase a mailing list at a reduced fee.
4. The AAOMS reserves the right to deny requests where the purpose or use may be considered not in the best interest of the Association or its purposes.

As a condition of granting exhibit space at AAOMS meetings, exhibitors agree not to conduct or sponsor any educational seminars over the dates of the AAOMS meeting. Exhibitors may conduct or host an event such as a breakfast, luncheon, dinner, reception or focus group over the dates of the meeting during non-programming hours as determined by AAOMS. An exhibitor may conduct or sponsor an education seminar immediately preceding or immediately following the meeting program. All requests to hold non-educational or educational functions must be submitted for review and approval to the AAOMS Exhibit Manager.
