



MAILING LIST ORDER FORM

The final pre-registration list is available in Excel format via email on a one time, one use basis after 26th. The Final registration list is available approximately 2 weeks after the close of the meeting. The fee for each list is \$100.00. Payment and a copy of your mail piece must be included with order form and sent to:

New England Surgical Society
500 Cummings Center, Suite 4400
Beverly, MA 01915
Telephone: 978-927-8330 | Fax: 978-524-0461
industry@nesurgical.org

Please charge my:   

Secure Fax: + 978.524.0461 **This form must be faxed if credit card number is showing. DO NOT EMAIL.**

Pre registration list \$100.00

Final registration list \$100.00

Total Charge: _____

Card #: _____ Sec. Code: _____ EXP: _____

Name on Card: _____

Signature: _____ Date: _____

Company Name: _____

Billing Address: _____

City/State/Zip: _____

Telephone: _____ Fax: _____

Email: _____

I understand by ordering the list(s), I will use them once and will not reproduce them. Please note that this list is seeded to detect unauthorized use and may be used for this mailing only. If unauthorized use is found, a \$1,000 fee will be imposed.

Contact Name: _____

Signature: _____ Date: _____