

**ABRF 2009**  
**PRE-SHOW & POST-SHOW MAILING LIST ORDER FORM**  
**Memphis Cook Convention Center**  
**February 7-10, 2009**  
**Memphis, Tennessee**

**Mailing List Terms and Agreement**

The names and addresses provided by ABRF are the property of the Association and are supplied for **one** specific mailing and for no other purposes. Upon completion of such mailing any unused list will be destroyed and will not be used for any other purpose. The e-mail will be opened within one week of receipt and any problems will be reported to ABRF 2009 Show Management immediately. The Association and Show Management are not responsible for refunds after this time. The list must be used within six months of purchase. Upon completion of order requests for updated registration lists will not be provided without additional charge to exhibitor. Past ABRF Annual Meeting lists are not available. The 2009 registration list will be available until December 31, 2009.

Show mailing lists include the following attendee information:

Full Name, Company/Institute, and Full Mailing Address

*(please note that phone and e-mail address are NOT included)*

**The list will be sent via e-mail in Microsoft Excel 2003 format.**

<b><u>SELECTION:</u></b>	<b><u>COST</u></b>
_____ Pre-Show Registration Mailing List (Available on/after December 31, 2008 for advance promotion)	<b>\$600</b>
_____ Post-Show Registration Mailing List (Available after February 11, 2009 for follow-up mailings)	<b>\$600</b>
_____ <b>SAVE \$100 – ORDER BOTH NOW!</b> <b>Pre-Show Registration List <u>AND</u> Post-Show Registration List</b>	<b>\$1100</b>

**CONTACT INFORMATION:**

Company Name		Contact Name	
Street Address	City	State	Zip
Telephone			
E-mail address			

**PAYMENT INFORMATION:**

☐ **CREDIT CARD**                      **OR**                      ☐ **CHECK** enclosed & made payable to: **ABRF 2009**

**Select one:**

☐ MasterCard                      ☐ Visa                      ☐ American Express

Credit Card Number \_\_\_\_\_ Expiration Date (MM/YY) \_\_\_\_\_

Name of Cardholder \_\_\_\_\_

Signature of Acceptance: \_\_\_\_\_

Name (Print) \_\_\_\_\_ Date \_\_\_\_\_