



# APPLICATION FOR AMCP MEMBER MAIL LIST RENTALS

This form must be accompanied by the List Rental Agreement and a copy of mailing piece(s) for approval.  
AMCP List Contact: Susan Noell, [maillist@amcp.org](mailto:maillist@amcp.org) or 703-684-2618

## REQUESTOR INFORMATION:

Name:	
Title:	
Company:	
Address:	
City, State, Zip code:	Phone:
Email:	
Intended List Use:	

### Important Notes on AMCP List Processing

- Order Fulfillment: Requests are typically filled 5-7 business days after approval and provided electronically in Excel
  - Lists include name, title, company, and address (no phone, fax or emails).
  - Sample piece and payment must be received before the list is provided.

### LIST REQUEST (Indicate desired list below)

AMCP Membership Lists	
<input type="checkbox"/>	AMCP Full Membership List
<input type="checkbox"/>	Active Members (Pharmacists, Nurses, Doctors) List
<input type="checkbox"/>	Associate Members (other healthcare providers) List
<input type="checkbox"/>	Resident Fellow Graduate Members List
<input type="checkbox"/>	Student Pharmacist Member List
<b>Pricing:</b>	
\$1 per name – AMCP corporate members*	
\$2 per name AMCP non-corporate members	

\*Third party agents of AMCP Corporate Members must submit a written statement that they are the official agent of the Corporate Member (specify by name) and authorized to receive pricing (list at [www.amcp.org/corporateroster](http://www.amcp.org/corporateroster)).

**LIST COST (Based on count):** Email AMCP ([maillist@amcp.org](mailto:maillist@amcp.org)) or call to confirm current count.

\_\_\_\_\_ X \_\_\_\_\_ = \$\_\_\_\_\_ (Minimum order \$1000)  
 (# of names) (Price per name) (total fee)

My company is an AMCP Corporate Member. My revised fee is Total Fee \_\_\_\_\_ x 50% = \_\_\_\_\_

### METHOD OF PAYMENT:

Credit Card       Check attached

Card Type \_\_\_\_\_ CC# \_\_\_\_\_ Exp: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Authorization Signature: \_\_\_\_\_



## AMCP LIST RENTAL AGREEMENT

**In consideration of the terms contained herein, each party agrees to the following:**

1. The Academy of Managed Care Pharmacy (AMCP) shall make available to \_\_\_\_\_ (hereinafter referred to as the Lessee) names and addresses of its members or conference pre-registrants for a total price of \$ \_\_\_\_\_ and for which the Lessee agrees to the terms and conditions contained in this agreement.
2. AMCP may provide info-only lists to exhibitors and other meeting participants which will be restricted to non-mailing purposes only. It is understood that info-only list do not provide street address information.
3. The Lessee will not use the names in connection with any communications, which, in the opinion of AMCP, would tend to mislead, misinform, deceive, or be distasteful in content or presentation.
4. The names will be used for mailing or informational purposes only and it may not be used for telephone or personal contact.
5. Prior to mailing, AMCP will request the Lessee to furnish to AMCP a copy or sample of all matter to be mailed. AMCP may disapprove any part or all of such matter for mailing. **The names, trademarks, service marks, logos, and icons of AMCP may not be used in any manner without AMCP's prior express written permission.**
6. The Lessee shall indemnify and hold AMCP harmless against all claims, damages, costs, expenses, including attorney's fees, arising out of the use of the names, including claims for infringement of copyright, trademark, or trade name, defamation, and misappropriation of proprietary rights.
7. The Lessee agrees to use the names for one-time only unless otherwise specified. **If Lessee should use mail list names, in part or in whole, for additional mailings, Lessee will be held responsible for purchase payment of complete list for each additional mailing.**
8. The Lessee is not to copy the names or any portion of the information. The names, and information thereon, at all times is and remains the sole property of AMCP. In no event shall the Lessee use, divulge to anyone, make copies or use same in any way except as permitted by AMCP.
9. The Lessee agrees to forward to AMCP, within ten (10) days following receipt, any letter or documents (or copies thereof) containing complaints by AMCP members or registrants regarding the Lessee's mailing, the matter transmitted therein, or the offered product or service.
10. For any breach of this Agreement, the Lessee shall be liable to AMCP for all damages, including reasonable attorney's fees, costs, and expenses, including expenses incurred in the investigation, and loss of income.
11. AMCP must approve the mailing piece in advance of the mailing and reserves the right to refuse any request at its discretion.
12. This Agreement shall be administered, interpreted, and enforced in accordance with the laws of the Commonwealth of Virginia, exclusive of its conflict of laws rules. Any claim or cause of action arising out of or connected with this Agreement shall be adjudicated solely and exclusively in either the U.S. District Court for the Eastern District of Virginia, Alexandria Division, or the Circuit or General District Court of the City of Alexandria, Virginia. The parties hereto expressly consent to the personal jurisdiction of such courts for this purpose, and waive all defenses and objections to the jurisdiction and venue thereof, including but not limited to forum non conveniens. Notwithstanding the foregoing, any judgment obtained in such courts may be enforced by any court of competent jurisdiction.
13. For any requests related to a program you wish to conduct during an AMCP national meeting, the activity must not conflict with any AMCP scheduled programs or events, including receptions.
14. Payment in full is required before lists can be sent to Lessee.

**For due consideration given and received, I agree to the terms stated above.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Lessee

