



Electronic Mailing List Rental Form

Please complete the following and mail or fax the SCRQSA with along with your payment.

Mailing List Cost: For Profit Company (\$100.00) Non Profit Company (\$50.00)

Date of Request: _____

Name of Person Requesting List: _____

Company: _____

Address: _____

(Address, City, State and Zip Code)

Telephone: _____ E-mail Address: _____

when do you need the mailing list: _____

[Requests are processed within ten days of receipt and are sent via E-mail to the address above]

Method of Payment: Check Money Order CC – Visa CC – MasterCard

Card #: _____ / _____ / _____ / _____ Check # (if applicable): _____

Billing Address (including City, State, Zip Code) _____

Expiration Date: _____ 3 or 4 Digit CVV Code: _____

Cardholder's Name: _____ Signature of Cardholder: _____

A sample of the mailing piece must accompany this request form before your order can be processed.

Please check this box that you have read and agree to these terms and conditions: The mailing list may only be used one time, and the names may not be saved or added to any database.

Acceptance Signature: _____

Upon approval, the mailing list will be sent via E-mail as an electronic Excel file. If you have any questions, please contact us at (877) 771-6141 or by email at scrqsa@capconsc.com.

South Carolina Radiation Quality Standards Association
P.O. Box 7515, Columbia, South Carolina 29202-7515
Phone: (803) 771-6141 / (877) 771-6141 (Toll Free) Fax: (803) 771-8048
E-mail: scrqsa@capconsc.com