**WOCN® Society Home Mailing List Rental Order Form**

The Wound, Ostomy and Continence Nurses Society (WOCN) consists of over 5,000 members nationwide. WOCN members are health care professionals who specialize in the prevention and treatment of stomas, ulcers, wounds and incontinence. Our members practice in a variety of settings, including private practice, acute and extended care, home health care, outpatient facilities and industry.

- WOCN Society Corporate Members receive 1 free mailing list per year and a special discount on all additional mailing list rentals
- Mailing lists may not be duplicated, sold, or re-used
- Lists are available electronically via e-mail (Excel).
- Lists are to be used **one time only**.

**To request a WOCN membership mailing list, follow these 3 steps:**
1. Complete the Mailing List Rental Order Form, indicating your list criteria.
2. Attach a copy of your proposed educational mail piece, and complete the Mailing List Rental Agreement.
3. Send all materials along with your payment to the WOCN National Office*.

**All requests must be paid in advance and accompanied by a sample of your mailing.** Once full payment is received, your order will be sent. All mailing list requests are subject to approval by WOCN.

Mail To: **WOCN National Office, 1120 Route 73, Suite 200, Mt. Laurel, NJ 08054**

Or fax to: 856-439-0525

**Please fill out completely.**

Contact Name: _____________________________________________________________

Company: ________________________________________________________________

Address: __________________________________________________________________

City: ________________________________ State: _______ Zip: ___________________

Country (if outside of U.S.): ________________________________________________

Phone: (_________) ____________________________ Ext: __________

Email: _________________________________________________________________

*Allow 10 business days to process mailing list orders.*
If you're an agency or broker, please list the name of your client:

____________________________________________________________________

Ship list to (if different from "ordered by"):

Name: __________________________________________

Phone: (__________) __________________________________________ Ext: __________

Fax: (__________) __________________________________________________________

Email: ____________________________________________________________________

**Order Information**

Please check off requested region(s) or circle desired state abbreviation:

- [ ] New England Region (CT, ME, MA, NH, RI, VT)
- [ ] Northeast Region (NJ, NY, PA)
- [ ] Mid-Atlantic Region (DE, MD, VA, DC)
- [ ] Mideast Region (IN, KY, MI, OH, WV)
- [ ] Southeast Region (AL, FL, GA, NC, SC, TN)
- [ ] North Central Region (MN, ND, SD, WI)
- [ ] Midwest Affiliates (IL, IA, KS, MO, NE)
- [ ] South Central Region (AR, LA, MS, OK, TX)
- [ ] Northwest Region (AK, ID, MT, OR, WA)
- [ ] Rocky Mountain Region (AZ, CO, NM, UT, WY)
- [ ] Pacific Coast Region (CA, NV, HI)
- [ ] International Members

List sorted by:  [ ] Alphabetical by Last Name  [ ] Zip Codes  [ ] States

**Pricing (please contact Jenna Bertini, jbertini@wocn.org, for a quote)**

Corporate Members: $750 full/$50-$500 partial

Non-members: $850 full/$150-$600 partial

**Method of Payment:**

- [ ] Check: Make checks payable to WOCN Society in US dollars and mail with your order form.

- [ ] Credit Card:  [ ] Visa /MasterCard  [ ] American Express

Card #: __________________________ Exp. Date: ______________

Name (as it appears on card): __________________________________________

Signature (required): ________________________________________________

- [ ] I am a Corporate Member using my free Full WOCN Society Membership list for the year.
1. The WOCN membership list can be utilized on a one-time only basis for educational mailings.

2. The mailing list renter agrees that it will not distribute, disclose, duplicate, reproduce or retain any portion of the list in any form, including entering the data into an electronic database. Further the list shall not be used for telephone solicitation of any kind, solicitation of funds or data collection.

3. The mailing list renter shall hold the WOCN harmless and indemnify the WOCN against any claim, damage, expense, liability or obligation incurred by reason of the renter’s use of the list, including without limitation—reimbursement of the WOCN for attorney’s fees and all costs the WOCN may incur in enjoining unauthorized parties from using the membership list in all cases where such unauthorized parties gained access to the list through the renter listed above or any of the renter’s agents or employees.

4. The mailing list renter agrees that the WOCN will have the right to monitor use of the mailing list. The mailing list renter further agrees that it shall not use the list in any way that does not comply with any and all applicable laws or regulations, or that violates any right of any third party.

5. The WOCN must approve all mail pieces prior to mailing. If the mailing list renter uses the list for distribution of materials in addition to or different from the mail piece approved by the WOCN, the mailing list renter will be liable for liquidated damages in the amount of $3,500, which the mailing list renter agrees is reasonable.

6. The WOCN retains absolute right to deny rental of the list, with or without cause.

7. The WOCN may not be cited on any portion of the renter’s mail piece.

8. The list contains unique and proprietary information and is the sole and exclusive property of the WOCN. The WOCN reserve all rights to the list and nothing in this agreement transfers or assigns any propriety right in the list from the WOCN to the mailing list renter.

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