

2013 Thomas P. Hinman Dental Meeting

Attendee Mailing List Order Form

Please use this form to purchase a list of the registered attendees to the *Thomas P. Hinman Dental Meeting*.

If you wish to place more than one order, please duplicate this form. FULL PAYMENT must accompany each order.

Name: _____
Firm/ Organization: _____ Booth #: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
E-Mail Address: _____

2013 Thomas P. Hinman Post Show Attendee Mailing List Order Form

List Options:

Entire List Options:

Electronic List - \$600.00
Complete attendee file, sent via e-mail
Flat List - \$540.00
Complete attendee file, available via
printed list or printed labels ONLY

Combined List Options:

Dentist (A, 1, 2):
Printed Version \$385.00
Electronic Version \$475.00

You may COMBINE any of the individual \$90 categories as a printed version ONLY for the following prices:

Any 2 \$90 Categories \$160.00
Any 3 \$90 Categories \$220.00
Any 4 \$90 Categories \$300.00

Select from the \$90 options to the right.

Please call for a quote on other combined lists.

Order Total: _____

(Georgia Residents add 7% Sales Tax)

Payment Information

Payment Type:

Visa MasterCard American Express
 Check _____

Card Number _____ Exp. Date: _____

Cardholder's Signature:

_____ Date: _____

Individual Printed List(s) or Printed Label Options:

CHECK ALL THAT APPLY

A. Dentists \$300.00
1. Dentists (First Year) \$90.00
2. Dentists (Second Year) \$90.00
F. Assistants \$205.00
G. Hygienists \$230.00
H. Office Staff \$165.00
I. Lab Technicians \$90.00
C. Residents \$90.00
D. Dental Students \$90.00
J. Student Assistants \$90.00
K. Student Hygienists \$90.00
L. Student Lab Technicians \$90.00
Q. Guest \$90.00

E-mail address provided if registrant opted to supply

List Type & Print Sequence

Select an option below if you DID NOT choose an electronic file.

Check preferred List Type: CHECK ONE

Pressure Sensitive Labels
Flat List (11" x 14")

Check Preferred Print Sequence: CHECK ONE

Registrant by Name
State by City
Zip Code

Credit card orders ONLY may be faxed to (678) 341-3099.

**** This list is intended for exclusive use by Hinman Exhibitors and shall not be resold or reproduced ****

Please mail completed order forms and payment to:

QMS Services, Inc. 6840 Meadowridge Court Alpharetta, GA 30005
Phone: (678) 341 - 3006 or 1(800) 824 - 2389 Fax: (678) 341 - 3099