



## 2011–2012 Mailing Label Request Form

**LAST DAY TO REQUEST LABELS FOR MAILINGS RELATED TO THE PHILADELPHIA ANNUAL CONFERENCE IS  
MARCH 15, 2012 (PLEASE ALLOW 5 WEEKS FOR PROCESSING)**

Complete this form and return it along with a sample of the proposed item to be mailed to the NCSM Executive Director. Use one of the following methods:

- Email: [office@mathedleadership.org](mailto:office@mathedleadership.org)
- US Mail: NCSM • 6000 Evans Ave Ste 3-205 • Denver CO • 80222-5423
- Fax: (303) 758-9616

### *Contact Information*

Contact Name: \_\_\_\_\_

Contact Title: \_\_\_\_\_

I am affiliated with an:  NCSM Platinum Sponsor Partner This is # \_\_\_ of 3 complimentary sets  
 NCSM Gold Sponsor Partner This is # \_\_\_ of 2 complimentary sets  
 NCSM Silver Sponsor Partner This is # \_\_\_ of 1 complimentary sets  
 For-Profit Organization (labels are \$600/set)  Not-for-Profit Organization (labels are \$250/set)

Affiliation Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

### *Billing Information*

Billing Address 1: \_\_\_\_\_

Billing Address 2: \_\_\_\_\_

Billing City: \_\_\_\_\_

Billing State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Billing Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Billing Email: \_\_\_\_\_

### *Shipping Information*

Ship to Person: \_\_\_\_\_

Ship to Address 1: \_\_\_\_\_

Ship to Address 2: \_\_\_\_\_

Ship to City: \_\_\_\_\_

Ship to State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Ship to Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Ship to Email: \_\_\_\_\_

***Purpose and Description***

Mailer Purpose: \_\_\_\_\_  
(E.g. "to promote a workshop," "to invite Western Region 1 members to a breakfast," "to advertise a job opening," etc.)

Mailer Headline: \_\_\_\_\_

Mailer File Name: \_\_\_\_\_  
(Indicate the name of the electronic file you are sending)

***Targeted Audience for Requested Labels***

Target Audience

- All Members (between 2100 and 2500 labels)  
(Most members are from the U.S.A. and Canada although there are some members who live abroad)
- Members from a particular set of a particular country(ies), state(s), province(s) or NCSM region  
(Number of labels varies)
- All Event Registrants for the following event:

\_\_\_\_\_  
(Name of Event©)

Sort for Requested Labels

- In Zip Code order by Country
- In Alphabetical order by Last Name
- Other—please specify

\_\_\_\_\_  
\_\_\_\_\_  
(Every effort will be made to accommodate your request.)

***Mailing Specifications***

Date Labels Needed: \_\_\_\_\_

***Payment Method***

- Credit Card
  - MasterCard
  - Visa
  - Discover Card
- Check—please indicate check number:

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

\*\*\*\*\* For office use \*\*\*\*\*

Postmark Date	Day Received	Tracking Number	Invoice Number