

Association of American University Presses Mailing List Rental Order Form

Mailing addresses of key staff of AAUP member presses are available for rental. Lists are available electronically as tab separated text or in an Excel file. Lists may be used one-time ONLY. No retention or reproduction is allowed.

Key contacts categories are listed below. There are approximately 130 contacts in each professional area (with fewer journals contacts). Please note that at many smaller presses, one contact often functions in multiple roles. For example, the same individual may be the primary contact for advertising, sales, and marketing.

Available lists (Please check the lists you wish to rent)

- | | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> Directors | <input type="checkbox"/> Acquisitions (Editors-in-Chief, Editorial Directors) | <input type="checkbox"/> Manuscript Editorial (Managing Editors) |
| <input type="checkbox"/> Design | <input type="checkbox"/> Production | <input type="checkbox"/> Business |
| <input type="checkbox"/> Sales | <input type="checkbox"/> Marketing | <input type="checkbox"/> Advertising |
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Exhibits | <input type="checkbox"/> Rights and Permissions |
| <input type="checkbox"/> Journals** | | |

** About 60 AAUP member presses have journals programs.

Cost

- AAUP members: **\$ 40** for the first list and **\$ 10** for each additional
 Non-members non-profit: **\$ 50** for the first list and **\$ 15** for each additional
 Non-members commercial: **\$ 80** for the first list and **\$ 20** for each additional

Format preferences

File format: Tab Separated Text Excel file

Sort: By zip code Alphabetically by press name

Send lists to

Name _____ Company _____

E-mail _____

Processing time

Please allow up to 5 business days for your request to be processed.

Payment

Orders will not be processed without accompanying payment or purchase order number.

Amount owed \$_____

____ Check payable to AAUP enclosed

____ Please charge ____ Visa ____ AMEX ____ MC

Acct. Number _____ Exp. Date _____

Name on card _____

Security code _____

Billing Address _____

____ Please invoice PO # _____ (AAUP members only)

Rental agreement (must be signed before order is processed)

_____ I agree to use this mailing list only one time. I will not disclose, transfer, duplicate, reproduce or retain any portion of the list in any form.

Name _____

Signature _____ Date _____

Company name _____

E-mail _____

Return to

AAUP
Attn: Kim Miller
28 W. 36th Street, Suite 602
New York, NY 10018
Fax: 212-989-0275
Phone: 212-989-1010 ext. 31
E-mail: kmiller@aaupnet.org