



Human Resource Association of the Midlands

Mailing List Advertising Form

Did you know that you can speak directly to our membership? Purchase our mailing list and send a one-time mailing directly to our membership regarding your company, upcoming events or programs.

	HR related event/program	Non-HR event/program
Non-profit organization	\$150	\$200
For profit organization (HRAM sponsor/advertiser)	\$250	\$300
For profit organization	\$350	\$400

Provide a brief description of use (attach actual mailing if possible):

The number of mailing list addresses provided will vary from time to time depending on HRAM membership and the willingness of members to provide their mailing addresses. Mailing lists are available for one-time use only and specifically for the purpose listed on back of form.

Company Name: _____ Contact Name: _____

Mailing Address: _____

City, State Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Authorized By: (Print) _____ Title: _____

Signature: _____ Date: _____

Price \$: _____ / _____ set(s) *Fill out contract on back of form to receive the mailing list via email.

I authorize HRAM to charge my: Visa MasterCard Amex Discover

Card #: _____ Exp. Date: _____

Name as it appears on card: _____ Signature: _____

Total Charge Amount: \$ _____ Email Receipt: Y (Include email) / N

Form and payment can be mailed to:
HRAM at Rockbrook Village, 11060 Oak Street, Suite 5, Omaha, NE 68144,
faxed to 402-932-1095 or emailed to staff@hram.org.
Make checks payable to HRAM.

*Contract on back to fill out.



Mailing List Advertising Contract

Please fill out contract and send in with advertising form/payment information.
The mailing list will be emailed to contact person in a ONE-TIME use Excel Spreadsheet..

1 COMPANY REQUEST FOR AUTHORIZATION TO USE HRAM MEMBER LIST

The _____ (insert requesting company name),
A customer of HRAM (hereafter called Company), requests permission from HRAM for the following:

This request is for one-time use only of this Excel mailing list of HRAM Members.

Purpose of the mailing - (Choose A or B):

- A. HR related event/program
- B. Non-HR related event/program

Intention of mailing - (Choose A, B or C) - Communication must be attached

- A. Membership drive
- B. Upcoming program or event
- C. Other: _____

Distribution of Mailing - (Choose A or B)

- A. Completed by the company entirely
- B. Completed by a third-party (example Mail House, non-HRAM entity)

Note: The third party entity's signature is required.

- If your company is a non profit organization, please mark this box.

2 The Company and third-party entity understands and agrees that (i) they may not use this mail list for any purpose other than that covered in the attached contract; (ii) they will not disclose or distribute the list to any third parties, and (iii) this list is owned exclusively by HRAM.

Signature of company designate Signature of third-party entity (if applicable)

Print Name

Title

Date

3 Send the completed contract form to:

Mail: Rockbrook Village, 11060 Oak Street, Suite 5, Omaha, NE 68144,
Email: staff@hram.org
Fax: (402) 932-1095