

ITNS Blast E-mail Application



GUIDELINES

The following guidelines apply to e-mail blasts sent on behalf of an external group:

1. ITNS must approve the content of all e-mail blasts sent to ITNS members by ITNS on behalf of an external party. Content must meet ITNS's submission requirements and criteria set forth in ITNS's policy on blast e-mails. ITNS reserves the right to refuse any e-mail blasts request for any reason. ITNS does not distribute surveys.
2. Allow 7–10 working days from the date that the form and draft message are received by ITNS to the date of distribution. No more than one external e-mail blast may be sent to members per month. No e-mails may be sent on Wednesdays or Thursdays. Delivery of e-mail blasts is contingent on that policy.
3. **Prepayment is required for all orders.**
4. When your application and payment are received, you will receive a confirmation.
5. Job postings are not accepted. Please post jobs on the ITNS Career Center at www.itns.org/careeropportunities.html.

SUBMISSION REQUIREMENTS

Banner image

- 650 px x 150 px
- high-resolution jpg file
- at least 150 dpi
- less than 10 MB
- submit as an e-mail attachment

Word document

- text exactly as you would like it to appear in the body of the e-mail
- hyperlinks included
- subject line included
- 1,000 words or less
- HTML code

Images

If you would like an image or logo in the body of the e-mail, indicate the placement using [insert image here] as a placeholder in the copy. All images must be submitted as an e-mail attachment and be less than 10 MB. Valid file types include bmp, jpg, jpeg, gif, and png. Maximum width is 650 px.

CONTACT INFORMATION

Company or organization name _____
Street address _____
City, state, ZIP _____
Contact name _____ E-mail _____
Phone _____ Fax _____
Date _____

PAYMENT INSTRUCTIONS

If paying by credit card: Fax the completed application to 888.374.7259 with payment information. E-mail a copy of your message to mmartin@ITNS.org with the subject line: ITNS Blast E-mail Application.

If paying by check: Send a copy of the completed application with payment to: International Transplant Nurses Society; P.O. Box 3781, Oak Brook, IL 60522.

PAYMENT METHOD

Fee: \$2,500 per message

MasterCard Visa Discover American Express

Account number _____ Expiration date _____

Name (as it appears on credit card) _____

Authorized signature _____

Check # (made payable to ITNS) _____

Questions? Contact Mickey Martin, Manager, Industry Relations

PO Box 3781, Oak Brook, IL 60522 • 847.375.4783 • mmartin@ITNS.org • fax 888.374.7259