



Center for Credentialing & Education, Inc.™

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CCE MAILING LABELS/E-MAIL ADDRESS ORDER FORM

Organization _____

Name of Contact Person _____ Telephone: _____

E-mail: _____ Fax: _____

Billing Address:

Shipping Address:

Address 1			Address 1		
Address 2			Address 2		
City	State	Zip	City	State	Zip

❖❖❖ **Purpose** - Attach a sample of your mailing form/brochure/E-mail and check this box ⇒ ❖❖❖

Specify Actual Date Needed _____ (allow 15 business days for your order to be received, approved and shipped)

Note: GCDF approved training providers and instructors will get a 50% discount on their order.

Label Type Requested: (Select one)

Pressure-Sensitive/Peel-Off \$ _____

ASCII on Disk \$ _____

ASCII via E-mail \$ _____

E-mail address list \$ _____

Cost of Labels:

Mailing labels \$100.00 per 1,000 Labels (Minimum order: \$100.00)

E-mail addresses \$100.00 per 1,000 email addresses (Minimum order: \$100.00)

Postage: (Please select one of the following options)

\$ 15.00 Overnight Shipment

\$ 5.00 Regular Mail

\$ 0.00 No postage due for ASCII via E-mail or E-mail address list

Total Due to CCE (Invoice will be included with your order)

AGREEMENT: I agree to use the requested labels/E-mail addresses only for mailing the materials submitted with this order. I further agree that these one-time use labels/E-mail addresses will not be duplicated or shared.

Signature of Authorized Representative

Date

Enclosed is a check, money order or cashier's check – payable to CCE – in the amount of: \$ _____

Please charge the credit card as listed below in the amount of: \$ _____

Card Type: VISA MasterCard

Account Number (16 digits)

Expiration Date - (Month/Year):

Signature of Cardholder _____