ITNS Blast E-mail Application

International Transplant Nurses Society

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

E-mail
Fax

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 mpaulson@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

I ALMEIN MEILIOD			
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)			