

# AMTA LABEL/LIST POLICY

Effective January 1, 2017

AMTA provides list rentals as a service to our members. Therefore, labels/lists must be used for mailings that are consistent with the mission of AMTA: *to increase public awareness of the benefits of Music Therapy and access to quality Music Therapy services*. We respect the privacy of our members and do not include information when a member has requested exclusion from 3<sup>rd</sup> party mailings. **Please review the entire label/list request policy before making your request.**

**Request using “AMTA Mailing Label/List Request Form”:** You must request labels/lists using the AMTA Mailing Label/List Request Form. The request **must** include a sample/copy of what is to be mailed which is subject to AMTA approval. Your submission and signature on the label request form to AMTA affirms your binding agreement to pay for records you receive. Do not send in the form for price quotes or if you are uncertain whether you wish to purchase. You will receive an invoice for the cost. Please do not send multiple copies as this could result in double charges. If purchasing an electronic list, no shipping is charged if an email address is supplied for “shipping”.

<b>Pricing:</b>	<u>Cost</u>	<u>Price</u>	<u>Minimum</u>
	AMTA Regions	\$ .10	\$ 10.00
	Current AMTA Members	\$ .15	\$ 15.00
	Non-Members	\$ .25	\$ 25.00

**Email Addresses for Regional and Research Purposes Only:** Email addresses can be made available to AMTA Regions for official regional business and to those conducting research in music therapy. These are the only two purposes for which email address requests will be approved. **For this service, you will be charged a fee per address.** Requests must be pre-approved by the AMTA Executive Director – this process requires up to 2 weeks additional time, so please plan ahead. Rush orders are not accepted. Include with your request:

- Completed AMTA Mailing Label/List Request Form
- A sample of your survey (or mailing) for pre-approval
- Your cover letter or email
- Approval letter from the appropriate Institutional Review Board (IRB) indicating the study has been approved. (In the event that an IRB approval letter is not possible, please provide a written explanation.)

Please send all these documents together with your request form. If you are requesting email addresses for research purposes, you should carefully consider the types of member categories you wish to request. An entire membership list of all member categories will be more expensive and you may not want to include some member types. For example, if your purpose is to survey professional members only, you may not wish to have students included. If you only wish to survey trained music therapists, you may wish to narrow further by checking “Members w/Music Therapy Designation or Credential Only” (some professional members may not have a music therapy credential or designation). Remember that Honorary Life, Grad Student, and Life members also may be professional music therapists. Once your research is complete, a copy of the final results would be appreciated and can be mailed to the AMTA National Office.

**Processing Time:** We process requests in the order they are received. A \$10 rush fee will be added to your invoice if your labels are needed sooner than 2 weeks from the date your request is received. Due to the volume of requests we receive at the National Office, we cannot process orders in fewer than five working days. AMTA reserves the right to refuse any request at any time.

**Terms of Use:** You may use the labels/list *one* time for the requested use *only*. You may not import any information provided into address books, contact lists or other data gathering applications. AMTA reserves the right to refuse any request at any time.

**What You’ll Get:** The list you receive will contain current AMTA members based on your criteria **on the day the list is queried**. New members join and change information daily so the total number of current members will change daily. It is advisable to order labels somewhat near your expected mailing date in order to get the most complete list. For questions or to get an approximate number of labels before submitting a request form, please call the AMTA office. The actual number of records is determined on the day your list is created.

**Format:** We provide labels as electronic lists. You will receive information in a Microsoft Excel file (.xls or .csv) which can be opened in most word processing or spreadsheet programs. You are responsible for formatting data appropriate to your specific situation and/or appending records with special identifiers. Because computers and software varies, you’ll need to contact your applications’ technical support or help desk for steps in doing this if you’re not already familiar with the process.

**AMTA reserves the right to refuse any request at any time. Please contact us with any questions or to obtain additional request forms at [info@musictherapy.org](mailto:info@musictherapy.org), [www.musictherapy.org](http://www.musictherapy.org), or at (301) 589-3300.**

## Frequently Asked Questions about AMTA Mailing Labels/Lists

If you have not ordered labels/lists before, please take a moment to familiarize yourself with some common questions below. If you have questions not answered here, please contact us at the national office before you submit your request form. We will be happy to help you. To help you determine how to fill out your form, here are some things to remember about mailing lists:

**How does AMTA receive addresses?** Members provide their own postal address when paying for membership and can update personal contact information online at any time. We make every effort to update and correct addresses, but addresses provided as supplied by the individuals. If you notice an incorrect mailing address, please encourage that person to contact the AMTA national office with their updated information. Only the member may make changes to their own personal contact information.

**Which names are included?** We've tried to reflect the varied needs for ordering labels on the request form. Current AMTA Members are those people who have paid for membership in the calendar year. Please be aware that those who have not yet paid their membership in a given year will not be included in a current member list. We make every effort to respect the privacy wishes of our members and allow opt-out from inclusion in 3<sup>rd</sup> party mailing lists – these records will not be included. We also make an attempt to exclude addresses which we know to be undeliverable (as determined by mailings returned to AMTA by the US Post Office). If you have specific needs that aren't options on the request form, please call the national office before ordering to make sure that we understand and can accommodate your need. For setting and population possibilities, please see possible search criteria in the AMTA Online Directory on our website.

**Members vs. Non-members:** We only provide current AMTA members in a list. Only AMTA Regions, as a part of AMTA, may request the information of those who are not currently AMTA members (e.g., non-members who were members last year). If you are requesting mailing addresses for upcoming regional conferences or regional membership drives, you may want to include non-members as well as members. Please keep in mind that addresses of non-members can be less accurate because these people have not contacted AMTA recently with an updated address.

**In what order should my labels be?** The order of your labels may be important to lower cost of your mailing. You may want to contact your mail house to ask for their suggestion before filling out the request form or simply make that change yourself in your electronic list. If this section is not completed on the request form, default is last name, then first name and since the list is electronic, you can often adjust that on your own end if necessary.

**Email addresses are provided only for official AMTA business, research purposes and occasional pre-arranged special offers.** As with any request, email addresses are available for one-time use only and may not be imported into address books or otherwise collected. A complete copy of what will be emailed must be provided with the request form and pre-approved. Please allow time for the approval process as edits may be requested by AMTA before approval is granted. Email addresses are also user provided and we have no control over incorrect addresses and bounce backs. (See FAQ above: **How does AMTA receive addresses?**)

**How are addresses updated?** AMTA members may update their own information at any time. When we are informed of a change in contact info (through mail, email, fax, or a phone call) we update our records within 7 business days. We also request address correction materials from the US Post Office. This process takes considerable time and information is not always current. If we receive mail returned with a new forwarding address, we re-send the mail to the new address and update our records. However, we often receive returned mail that is simply marked "No Forwarding Order." In this case, it is not possible to re-send or update the address. Please encourage members and non-members in your region to take a moment and update their contact info on the AMTA website so their mailings will be received.

**How long are lists current?** Address changes, as well as membership dues, are received daily and can change the composition of lists. Therefore, any request is only as current as the day they it is processed. Please keep this in mind when ordering labels - members who have not paid for their membership dues at the time of your order may not be included and it is often useful to request a list as close to your mailing date as the approval process allows.

**How long does it take to process labels?** Priority is given to Regional label requests. Other requests are filled in the order they are received. Please allow for at least 2 weeks' processing time. Orders required in less than 2 weeks will be charged a rush fee and filled as time allows but often cannot be filled in fewer than 5 working days.

**Usage Agreement:** You may use the labels/lists one time and for the requested use only. This enables us to provide you with the most accurate list each time. You may not import any information provided into address books, contact lists or other data gathering applications. For email mailings, include everything in a BCC or blind copy field. AMTA reserves the right to refuse any request at any time. If you have questions, please do not hesitate to call the national office at (301) 589-3300.

# AMTA Mailing Label/List Request Form

Please fill out all sections of this form completely and mail, email or fax to AMTA at 301-589-3300.

**1. Bill to:** *(for regions, your regional treasurer)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ship** *(or Email)* **to:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ email address: \_\_\_\_\_

**2. Purpose:** \_\_\_\_\_ *(Include sample/copy of what you will mailing. All requests subject to approval by AMTA.)*

**3. Format:** *(check one)*  Mailing (postal) addresses in electronic file  
 Email addresses in electronic file – *available for AMTA official business & research requests only (requires pre-approval & additional time. See “Email Addresses for Regional & Research Purposes Only”)*

**4. Labels Requested:** *(Check as many criteria as you would like below to narrow your query. Carefully consider the types of member categories you wish to request. An entire membership list of all member categories will be more expensive and you may not want to include some member types. For example, if your purpose is to reach professional members only; or if you only wish to survey trained music therapists, you may wish to narrow to only those with a music therapy designation or credential. Remember that Honorary Life, Grad Student, and Life members may also be professional music therapists.)*

**REGION/AREA:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Entire US <i>(no international)</i> | <input type="checkbox"/> Great Lakes region  | <input type="checkbox"/> Midwestern region           |
| <input type="checkbox"/> Entire US & International           | <input type="checkbox"/> New England region  | <input type="checkbox"/> Southwestern region         |
| <input type="checkbox"/> Only these states: _____            | <input type="checkbox"/> Mid-Atlantic region | <input type="checkbox"/> Southeastern region         |
| <input type="checkbox"/> Other: _____                        | <input type="checkbox"/> Western region      | <input type="checkbox"/> AMTAS <i>(all students)</i> |

**CURRENT MEMBER TYPE(S) DESIRED:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> All Current AMTA members |  |  |
| <input type="checkbox"/> Professional members     | <input type="checkbox"/> Honorary Life members                       | <input type="checkbox"/> Life members                |
| <input type="checkbox"/> Student members          | <input type="checkbox"/> Grad. Student members                       | <input type="checkbox"/> Retired members             |
| <input type="checkbox"/> Associate members        | <input type="checkbox"/> Members w/MT designation or credential only | <input type="checkbox"/> Other _____                 |
| <b>Regional business only:</b>                    | <input type="checkbox"/> Non-members who were members last year      | <input type="checkbox"/> Non-member music therapists |

**OTHER:**

- AMTA Executive Director (1)     AMTA President (1)     Regional Newsletter Editors (10)  
 Other search criteria *(please specify & check ahead to determine if this is possible):* \_\_\_\_\_

**5. Sorted by:** *(if nothing checked, default is Last name, First name)*

- Last name, First name     Zip Code, Last, First     City, State     Other: \_\_\_\_\_

**6. Date needed:** \_\_\_\_\_ (month) / \_\_\_\_\_ (day) / \_\_\_\_\_ (year) *Must provide at least 5 working days for processing.*

**7. Signature:** *By signing below, I affirm that I have reviewed and agree to the 2017 label policy. I agree to use these labels once only. I know that there is a “per record” cost (\$.25; current member discount, \$.15) for the records I am requesting using this form. I am aware I will be invoiced for this cost and I agree to pay this invoice when received.*

Signature: \_\_\_\_\_

Print full name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Date: \_\_\_\_\_