

AMERICAN ACADEMY OF AUDIOLOGY
SAA SURVEY DISTRIBUTION REQUEST FORM

For SAA members who want to send out a survey to other SAA Members, the Academy will send this message free of charge. Only one email will be sent per survey and the email must be text only (no attachments).

Please complete and return this form; fax to 703-790-8631, mail to American Academy of Audiology, Attn: Rachael Sifuentes, 11480 Commerce Park Drive, Suite 220, Reston, VA 20191 or email to rsifuentes@audiology.org. Requests should include this form, the text for the email and a link to your survey. Message will not be sent until we are in receipt of the above mentioned materials. Approved materials will be kept on file.

Order Date: _____

Category: (please check one)

- Entire SAA Membership (includes undergraduates, domestic and international)
- Exclude Undergraduate members
- Domestic Only
- Domestic and Canadian Only
- State(s) _____
- Zip Code Range: _____ to _____
- Other: _____

Complete the following:

NAME _____ ACADEMY ID _____

UNIVERSITY _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE: _____ FAX: _____ EMAIL _____

Subject Line for Email Message _____

Based on your criteria, Academy staff will provide the number of names found and will notify the applicant. Number of names found _____