



**HACU MERCHANDISE ORDER FORM**  
**Requestor and Shipping Information**

Organization \_\_\_\_\_  
Contact Name \_\_\_\_\_ Title \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**2009 Membership Directory Publication** \$30.00 each Quantity \_\_\_\_\_ \$ \_\_\_\_\_

**Member Addresses.** Member mailing addresses are in Excel format and are sent via e-mail at no shipping cost. E-mail addresses, faxes and telephone numbers are not included. Orders are processed weekly.

**Indicate member type requested:**

- National Members (Colleges/Universities in the U.S.)       International Institutions       Both National & International

**Indicate contacts requested:**

- President/CEO       Director of Government Relations (Nat. members only)  
 HACU Contact       Verifier of Financial Aid  
 Director of Grants and Contracts (Nat. members only)       Title V Director (HSIs members only)  
 Director of Career Services       Registrar (Nat. members only)  
 Director of Communications (Nat. members only)       Director of International Programs  
  
 Faculty and Staff Caucus (Individuals from Member and non-member colleges/universities)  
  
 Hispanic Serving School District Superintendents/CEO (approx. 23 as of 2009)

**Cost per contact:**

- \$30 for any one contact       \$60 for any two contacts  
 \$90 for any three contacts       \$120 for any four contacts  
 \$150 for all contacts

**Subtotal \$** \_\_\_\_\_

\* - contacts are included from National Members, Caucus, and HSSDs  
10% Discount for HACU Members

(\$ \_\_\_\_\_)

**Total Order Billing Amount**

\$ \_\_\_\_\_

**Intended Use of List**

State your purpose for this list. \_\_\_\_\_  
A sample of your mailing is required with your order. Orders must be prepaid and will not be processed without a sample mailing. HACU reserves the right to deny mailing information to an outside party.

**One-Time Use Waiver**

The HACU member list provided is intended for one-time usage only for the sole purpose stated above. Lists may not be reproduced or resold in any way. Using this list for subsequent mailings or purposes not stated above without prior written consent from the HACU is a violation of this agreement.

Name \_\_\_\_\_ Title \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Method of Payment**

- Check** payable to "HACU"      **Credit Card:**     American Express     MasterCard     VISA

Account # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

**Return Merchandise Order Form.** Send your completed order form and a sample of your mailing to:

HACU • Membership Department • 8415 Datapoint Drive, Suite 400 • San Antonio, Texas USA 78229  
Tel: (210) 576-3231 • E-mail: memberinfo@hacu.net • Fax: (210) 576-3292