

DMAchoice Registration Form for Mailing Preferences

If you want to reduce the amount of unsolicited national advertising mail you receive **at home**, you may register with DMAchoice™ by mailing this form to the address below. Please include \$1 for each completed form — check or money order payable to the DMA. Please **do not send cash**.

DMAchoice Direct Marketing Association PO Box 643 Carmel, NY 10512

Please allow 60 – 90 days after registration to begin receiving less mail. Your name and address will remain on DMAchoice for three years.

This form allows you to enter up to three individuals at the same address (or three variations of your name at the same address). For separate addresses, please use separate forms.

Primary Name	First:	Last:	
Secondary Names	First:	Last:	
	First:	Last:	
Address:	Street:		
	City/State/Zip code:		
ing your name and home a business address.) You	e address from their mai will continue to receive that not all organization	mmercial and nonprofit organizat ling lists. (This service does not ap mail from those organizations wit is use DMAchoice; therefore, you political organizations.	oply to advertising mail sent to th which you already
Signature:			
Email address:			
Providina vour email ado	dress will allow us to cor	itact vou when vour three-vear rec	aistration period expires.