

Company Contact Information



Please list below the information of the contact that you would like posted on the DTC National webpage along with in the DTC National binder distributed at the conference.

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

Webpage: _____

Please list below the information of your everyday contact.

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

Please check your category and circle you company's subcategory listed below.

- Agencies** - (Consumer/Professional, CRM, Multi-Cultural, Public Relations)
- DTC Solutions Providers** – (Academia, Call Centers, Consultants, Database, Direct Marketing, Executive Search Firms, Mailing/Fulfillment Houses, Market Research, Patient Education, Premium Specialty Products)
- Media** – (Alternative, Buying & Planning, Magazine, Multi-Cultural, Newsprint, Out of Home, Point of Care, Radio, Sunday Supplements, TV)
- Web / eHealth** – (Health Portals, Interactive Agencies, Search Websites, Software Production, Web Design).