



NMTCB Mailing Labels Order Form

PURCHASE ORDER NO: _____

FULL NAME: _____

TITLE: _____

INSTITUTION/COMPANY NAME:

SHIPPING ADDRESS (USE STREET ADDRESS):

BILLING ADDRESS:

PHONE: _____

3558 Habersham at Northlake
Building I
Tucker, GA 30084
(404) 315-1739
FAX: (404) 315-6502

**Serving Nuclear
Medicine
Technologists
around the world.**



A detailed description of the intended purpose of the mailing and a sample mailing piece must be attached. You must also sign this statement:

“I hereby certify that I will use these lists for the purpose described on the attached sheet and guarantee that these addresses will be used solely by the institution or company named above. I understand and agree that these names and addresses are rented for one-time use and are not to be reused or shared in any manner.”

Authorized signature: _____

MAILING LIST MAY BE PROVIDED ELECTRONICALLY (BY CD OR E-MAIL) AS AN EXCEL FILE OR COMMA DELIMITED LIST.

Q. Who can use the NMTCB Mailing lists?

- A. You can use the NMTCB Mailing lists if you
- + are engaged in academic research,
 - + wish to provide products or services related to nuclear medicine,
 - + wish to advertise educational products or services related to nuclear medicine,
 - + are an employer or recruiter of nuclear medicine technologists.

Q. Are the lists up to date?

- A. The registrant list is updated daily. The entire list is updated with three first-class address correction mailings annually.

Q. What does the list cost?

- \$65 for 999 names or less; this is the minimum order
- \$60 per 1,000 names for quantities between 1,000 and 5,000
- \$55 per 1,000 names for quantities over 5,000

Additional charges

- \$8.00 per 1,000 pressure-sensitive labels
- Actual mailing costs

**Contact NMTCB to place
order**

3558 Habersham at Northlake

Building I

Tucker, GA 30084

(404) 315-1739

FAX: (404) 315-6502

e-mail: board@nmtcb.org

Remember to:

- ✓ Provide the street address where the labels will be shipped.
- ✓ Sign this form.
- ✓ Include a statement of intended purpose.
- ✓ Include a sample mailing piece.
- ✓ Send no money now; you will be invoiced.

STATES of Certified Nuclear Medicine Technologists. (check all needed)

- | | | |
|--|---|---|
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Louisiana | <input type="checkbox"/> Oklahoma |
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> Oregon |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Maryland | <input type="checkbox"/> Pennsylvania |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Maine | <input type="checkbox"/> Puerto Rico |
| <input type="checkbox"/> California | <input type="checkbox"/> Michigan | <input type="checkbox"/> Rhode Island |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Minnesota | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Missouri | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Dist. Of Col. | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Montana | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Utah |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Nevada | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> Hawaii | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Iowa | <input type="checkbox"/> New Jersey | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Idaho | <input type="checkbox"/> New Mexico | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Illinois | <input type="checkbox"/> New York | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Indiana | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Wyoming |
| <input type="checkbox"/> Kansas | <input type="checkbox"/> North Dakota | |
| <input type="checkbox"/> Kentucky | <input type="checkbox"/> Ohio | |