



NMTCB Mailing List Order Form

3558 Habersham at Northlake, Bldg I
Tucker, GA 30084
Phone: (404) 315-1739
Fax: (404) 315-6502
Email: board@nmtcb.org

Purchase Order Number:	
Full Name:	
Title:	
Institution/Company Name:	
Shipping Address (Street):	
Billing Address:	
Phone Number:	
Email Address:	

A detailed description of the intended purpose of the mailing must be attached. In order to purchase an NMTCB mailing list, you/your organization must also consent to the following:

"I hereby agree that I will use these labels for the purpose described in my explanation/description provided to NMTCB. I guarantee that this information will be used solely by the institution or company named above and will not be distributed to other parties. I understand these names and addresses are not to be copied or re-used in any manner."

Signature of Authorized Individual: _____

Q: Who may 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.

NMTCB's registrant list is updated every business day.
The mailing list that will be provided to you contains the most up-to-date and current information provided for by each NMTCB certificant.

Q; What does the NMTCB mailing list cost?

For physical mailing addresses only:

\$65 for 999 contacts 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

For email addresses only:

\$55 for 999 contacts or less; this is the minimum order
\$50 per 1,000 names for quantities between 1,000 and 5,000
\$45 per 1,000 names for quantities over 5,000

For physical mailing address AND email address:

\$70 for 999 contacts or less; this is the minimum order
\$65 per 1,000 names for quantities between 1,000 and 5,000
\$60 per 1,000 names for quantities over 5,000

The NMTCB mailing list will be provided electronically (by CD or email) as an Excel or CSV file to the recipient listed in the application above.

Print this form, fill in the information and fax it to NMTCB at Fax# (404) 315-6502.

If you have any questions regarding Mailing Lists, please contact the office (404) 315-1739.

Please Remember To:

- Include all information in the order form above.
- Sign the form
- Include a statement of intended purpose.
- Include a sample mailing piece.
- Send no money now; you will be invoice.

Locations of Certified

Nuclear Medicine Technologists

(CHECK Locations Needed)

- **ALL Below**
- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Vermont
- Virginia
- Washington
- West Virginia
- Wisconsin
- Wyoming