



Mail to: Nevada Weed Management Association  
PO Box 150033  
Ely, Nevada 89315

## 2018 Last Chance CEUs

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Payment Method: Cash \_\_\_\_\_ Credit Card \_\_\_\_\_ Check \_\_\_\_\_

Membership Level: \_\_\_\_\_

NWMA Member \$100.00 _____	Non-Member \$150.00 _____	<b>Thank You</b>

Total: \_\_\_\_\_

For Credit Card Payment

Name on Card: \_\_\_\_\_ Zip Associated with Card Statements: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV # \_\_\_\_\_

With any questions or concerns call Ed Ryan (775) 463-2265 Extension 3111

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*Please retain this portion for your tax records.*

### Nevada Weed Management Association Continuing Education Units Receipt

Type of Membership: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Check Number or Card Used: \_\_\_\_\_

