

Request for Listing in the NBCC Continuing Education Calendar

As a service to NBCC [certificants](#) and *approved providers* of continuing education, NBCC maintains a calendar of live-event activities on the Continuing Education page of our Web site (www.nbcc.org). Contents of the calendar are subject to NBCC approval. **Providers may list up to 150 events, free of charge, during each calendar year.** Additional events may be listed for a fee of \$10 each and must be submitted by mail. Full payment must accompany this form.

Directions

To submit event listings by e-mail: You may e-mail the information below, in the order in which it is listed, to recertification@nbcc.org. **If you submit more than one event, list all details of each event separately.**

To submit event listings by postal mail: Please **clearly print** the information below and mail to:
NBCC Continuing Education Calendar, 3 Terrace Way, Greensboro, NC 27403-3660.

Event listings must be received SIX WEEKS prior to the event date.

Date of live event: _____

State location (or Country, if international): _____

City location: _____

Title of activity: _____

Sponsoring organization: _____

Contact person for listing: _____

Contact information for listing: _____

Form completed by: _____

Date: _____ NBCC Approved Provider number (must be included) _____

Payment information: This is only required for those providers who have reached the maximum 150 listings for this calendar year. Each event over the maximum 150 can be listed for a charge of \$10. If you wish to submit multiple listings at one time, please include a separate form for each event, but it is only necessary to complete one payment form.

Check one payment option:

Enclosed is a check, made payable to NBCC, in the amount of \$ _____

Please charge my credit card for the amount of \$ _____

MasterCard VISA American Express

Name on card (**print clearly**): _____

Card number (**print clearly**): _____

Expiration date: _____ Security code (3- or 4-digit number on back): _____

Signature of cardholder: _____

Daytime phone number: _____ Evening phone number: _____

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