



7 Elmwood Drive ♦ New City, New York 10956 ♦ (845) 639-1439

www.NCTRC.org

Fax ♦ (845) 639-1471

CTRS Credentials Request Form

I hereby request new credentialing materials for the following reason:

- lost damaged never received desire duplicate for personal file
- other _____

Note: If you need new credentials (i.e., card and certificate) due to having never received them and this request is not due to a change in address, there is no fee, as long as you are requesting the new credentials within 8 weeks past your expiration date. If this is the case, you may return the completed form to NCTRC via fax: (845) 639-1471.

I understand that I am entitled to only one current valid set of credentials. Further, I understand that I may not give my credentials to another person. This is to prevent falsification of credentials. Therefore, should I at any time have duplicate credential documentation, I will either destroy the duplicate set or keep it strictly for my personal file.

Legal Name: _____

Certification ID#: _____

Address/City/State/Zip Code: _____

Day Phone: _____ Home Phone: _____

Fax: _____ Email: _____

Signature: _____

Payment Options: NCTRC accepts Credit Cards, Checks and Money Orders. Please fill out the appropriate selection:

I have enclosed the appropriate funds to cover the expense of the items requested below:

card - \$10 certificate - \$10 pin - \$10 Total= \$ _____

CHECK MONEY ORDER CREDIT CARD

Type of Card: Visa MasterCard American Express

Name as it appears on card: _____

Card Number: _____

Expiration Date: ____ / ____

By signing below I do hereby authorize NCTRC to charge \$ _____ to the above Visa/MasterCard/American Express Account

Signature (required): _____

Date: _____