

Northern Nevada District Dietetic Association Membership Form 2010-2011

Please note you must be a member of American Dietetic Association
to be a member of NNDDA.

NAME: _____ CREDENTIALS: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PREFERRED TELEPHONE #: _____

PREFERRED E-MAIL: _____

MAIN AREA OF PRACTICE: _____

PLACE OF EMPLOYMENT: _____

Why I want to be a member: _____

Favorite NNDDA activity you have attended: _____

Type of activity you would like to see more
of: _____

Please make the check (\$15 general; \$5 Retired/Student) payable
to NNDDA, and mail along with this form to:
Carrie Robertson, 1340 Marne Dr., Reno, NV, 89503

Thank you for your support! We look forward to seeing you!

Purpose

The purpose of this association is to promote optimal health and nutritional status of Northern Nevadans through education, research, and the provision of direction and leadership for quality dietetic practice; and to strengthen the profession through affiliation with the Nevada State Dietetic Association.