

Northern Nevada District Dietetic Association Membership Form 2011-2012

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:
Deanna Bradburn, 7833 Zafiro Ct, Sparks, NV 89436

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.