

e-Blast Request Form: Professional Practice



Individuals/organizations may request that NCTRC distribute information directly related to professional practice issues, informal research surveys, or important developments that directly affect the CTRS® profession and Recreational Therapy/Therapeutic Recreation (RT/TR) Practice.

Note: NCTRC does not distribute generic information from commercial vendors.

The request for distribution of materials related to formal research projects or academic thesis studies must be submitted via the *NCTRC e-Blast Request Form: Research Study Notification*.

REQUEST PROCESS & PROCEDURES:

1. The request form, payment and signed agreement should be received by NCTRC at least thirty (30) days before the actual date of the expected email distribution. Requests submitted less than thirty (30) days prior to deadline may not be reviewed. To apply for expedited review, additional fees will apply.

2. The e-Blast email distribution available for purchase includes only CTRS certificants who have consented to receive email communication from NCTRC. NCTRC does not release the actual email addresses of CTRSs or individuals on NCTRC's database. Rather, NCTRC distributes an e-Blast to CTRSs and individuals on NCTRC's database.

3. The email distribution sent via the NCTRC system will include the following statement from NCTRC:

**NCTRC has been requested by (name of requestor/organization) to provide you with the following link:
(insert link)**

4. The requestor/organization's URL should be a public-facing URL (not behind a login). The URL will be enabled for direct access to the requestor/organization's website.

5. NCTRC does not endorse or sponsor any of the activities of this individual or organization.

6. The request will not be processed unless all required website links and appropriate fees are received by NCTRC along with the signed Licensing Agreement.

7. Please allow up to 30 days for the request to be processed.

8. NCTRC shall maintain final approval of all requests for the email distribution and reserves the right to withhold distribution of material to protect the interests of NCTRC and/or NCTRC's certificants.

Instructions to submit completed form:

Email the completed form to nctrc@nctrc.org.

E-BLAST REQUEST FORM: PROFESSIONAL PRACTICE

Please provide the following information in order to process the application in a timely manner:

Organization Name:

Contact Person:

Street Address:

City:

State/Province:

Postal Code:

Country:

Daytime Phone:

Email:

LICENSING AGREEMENT

By signing below, you agree that you are authorized to enter into this Licensing Agreement on behalf of your organization. You further agree to indemnify NCTRC for NCTRC's cost and expenses (including, but not limited to, attorney's fees, costs and damages) to enforce this NCTRC email Licensing Agreement if you and/or your organization violate the terms of this agreement.

Signature *(required)*

Date

Please provide a brief description of the professional practice information that will be provided in the URL (web link) below.

Name of Requestor/Organization:

URL:

Note: The requestor/organization's URL should be a public-facing URL (not behind a login). The URL will be enabled for direct access to the requestor/organization's website.

First e-Blast: \$200.00. Date Requested Week of (mm/dd/year):

Additional \$25 expedited request fee applied. Fee applies to requests made less than thirty (30) days before the requested promotional date noted above.

Second e-Blast: \$50.00. Date Requested Week of (mm/dd/year):

Additional \$25 expedited request fee applied. Fee applies to requests made less than thirty (30) days before the requested promotional date noted above.

OPTIONAL - Request a Specific Contact Group or Email Distribution: Complete this section if you are requesting email distribution only to specific group list. Ex. only CTRs who reside in a specific state(s)/province(s). An additional processing fee of \$25/list will apply if the request is approved by NCTRC.

PAYMENT OPTIONS

The completed request form, payment and signed agreement should be received by NCTRC at least thirty (30) days prior to requested e-Blast date(s).

NCTRC accepts Credit Cards, Checks and Money Orders (payable to NCTRC in US Funds).

[NCTRC Credit Card and ACH Authorization Form](#)

NCTRC

Credit Card and ACH Authorization Form

CREDIT CARD

For your convenience NCTRC accepts Visa, MasterCard, American Express and Discover. Please complete the information below including signature and email, fax or mail to NCTRC.

Visa

MasterCard

American Express

Discover

Name as it Appears on Card:

Card Number:

Expiration Date:

Security Code:

Total:

ACH TRANSFER

Please complete the information below including selecting account type and email, fax or mail to NCTRC.

Name on Account:

Account Number:

Routing Number:

Personal Checking

Personal Savings

Business Checking

Business Savings

By signing below I do hereby authorize NCTRC to charge \$
credit card or bank account.

(payable to NCTRC in US Funds) to the above

Signature *(handwritten or digital)*

Date

National Council for Therapeutic
Recreation Certification®

Protecting and Promoting Since 1981

845 639 1439

nctrc.org

NCTRC is a member of the Institute for Credentialing Excellence (I.C.E.) and the CTRS Credentialing Program is accredited by National Commission for Certifying Agencies (NCCA). "NCTRC", "National Council for Therapeutic Recreation Certification", "CTRS", and "Certified Therapeutic Recreation Specialist" are the registered trademarks of the National Council for Therapeutic Recreation Certification. Unauthorized use of any NCTRC trademark or confusingly similar mark is strictly prohibited. NCTRC does not warrant or guarantee the provision of competent services by certificants; NCTRC certification helps to demonstrate the certificant has met the requirements for the profession.

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