

Nevada Physical Therapy Board



3291 North Buffalo Drive, Suite 100 · Las Vegas, NV 89129
Phone (702) 876-5535 · Facsimile (702) 876-2097

LICENSEE MAILING LIST ORDER FORM

BUSINESS ADDRESS LIST

→ [This list provides the names and business address of all active licensees in zip code order]

- | | |
|---|----------|
| <input type="checkbox"/> Physical Therapists | \$ 50.00 |
| <input type="checkbox"/> Physical Therapist's Assistants | \$ 50.00 |
| <input type="checkbox"/> PTs & PTAs combines – together on one list
(profession indicated) | \$ 50.00 |

LICENSURE LIST

→ Name, license number, issue date, expiration date, status of all active licensees.

- | | |
|---|----------|
| <input type="checkbox"/> Licensure List | \$ 25.00 |
|---|----------|

DELIVERY OPTIONS (check one)

- | | |
|---|--------------------------|
| <input type="checkbox"/> Excel Spreadsheet – Sent via Email | \$ 0.00 |
| <input type="checkbox"/> Plain Paper – Sent Regular Mail | \$ 0.00 |
| <input type="checkbox"/> Plain Paper – Sent Federal Express | \$ 4.00 (pick-up charge) |
- (Requester must provide pre-printed shipping label with your Fed Ex Account #)

TOTAL ENCLOSED: \$ _____

We accept checks, Money Orders and Cashier's Checks ONLY

EMAIL ADDRESS: _____

MAILING INFORMATION: (Please provide complete name and mailing address)

NOTE: Residential addresses are not provided for licensees. The Board does not offer lists on mailing labels, disk or in any format other than those indicated above. All mailing lists are one-time use only.