



**National
Association of
Neonatal
Nurses**

Table Skirt & Literature Request

Name: _____ Chapter: _____

Function: _____

Dates: _____ Estimated number of attendees: _____

Shipping Address: _____

Literature requested:

- | | |
|--|---|
| <input type="checkbox"/> membership applications | <input type="checkbox"/> Conference promotion |
| <input type="checkbox"/> sample Newsletter | <input type="checkbox"/> sample Journal |

I agree to ship the NANN table skirt and any literature I do not need back to NANN within 3 days of the end of the chapter function. A return airbill will be provided by the NANN office.

Signature: _____