STATE OF NEVADA

JIM GIBBONS
Governor

MICHAEL J. WILLDEN
Director

ALEX HAARTZ, MPH
Administrator

State Health Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH DIVISION
4150 Technology Way, Ste 300
Carson City, NV 89706
Telephone: (775) 684-4200 • Fax: (775) 684-4211

TO: All Interested Parties

FROM: Ike Cress
Nevada State Health Division, Bureau of Community Health

RE: Advisory Council on the State Program on Fitness and Wellness
Agendas/Minutes/Support Materials List

This form serves as a request to be included on the mailing list for the Advisory Council on the State Program on Fitness and Wellness agendas/minutes/support materials.

I am interested in being placed on a distribution list for the Advisory Council on the State Program on Fitness and Wellness. YES_____ NO _____

If yes, please specify which list you would like to be on. (If you do not specify a list, you will be placed on the 'Agenda's Only' list).

1) I am interested in receiving *only the Agendas* _____

2) I am interested in receiving *only the Agendas and the Minutes* _____

3) I am interested in receiving the *Agendas, the Minutes and the Support Materials* _____

Please fill in your current name, title/organization and mailing address:
Name:
Title/Organization:
Address:

Please send the specified materials via email: YES_____ NO _____

If yes, provide your email address:

Please return this form to:

Ike Cress, Nevada State Health Division
4150 Technology Way, #101
Carson City, NV 89706

Submit by Email