



North Carolina Board of **Recreational Therapy** Licensure

PO Box
Durham, NC 27705
(336) 212-1133

Web Address: www.ncbrtl.org

Compliance and Ethics Training

Date: _____

Location: _____

Total Due: \$40.00 for registration

Pay online www.ncbrtl.org Log In under "Licensees", Online Services, "Pay for Training"

Or make checks payable to: The *North Carolina Board of Recreational Therapy Licensure* or *NCBRTL*

Name _____
Last First Middle/Maiden

North Carolina Board of Recreational Therapy Licensure Number: _____

Date of License first issued: _____

Check Appropriate Level ___ Licensed Recreational Therapist ___ Licensed Recreational Therapy Assistant

Job title _____

Agency Name _____

Address _____

City _____ State _____ Zip Code _____

Wk Phone(_____) _____ Hm Phone(_____) _____

email _____

For Webinar session (offered first Friday in August only)
Due mailed in by Sept 1st

Codes given during the training:

Code #1 _____

Code #2 _____

Code #3 _____