



## Subscribe today!

**PHONE** 800 551.7379 or  
614 898.7791 M-F  
8 a.m.-5 p.m. (ET).  
Have credit card ready.

**FAX** completed form to  
614 898.7786, 24 hours a day,  
7 days a week.

**MAIL** completed form to  
NGWA  
601 Dempsey Rd  
Westerville, OH 43081  
(Allow 3 to 4 weeks for processing.)

### Subscription options Please check.

#### Member

US/CAN INTL  
1 YR  \$45  \$90

#### Nonmember/ Institutional

US/CAN INTL  
1 YR  \$125  \$170



MAILING ADDRESS

Name \_\_\_\_\_ Job title \_\_\_\_\_  
Business name \_\_\_\_\_  
Business address \_\_\_\_\_  
 Check here if this is a change of address.  
City, State/Province, Zip/Postal code \_\_\_\_\_  
Country \_\_\_\_\_  
Business phone \_\_\_\_\_ Business fax \_\_\_\_\_  
Business email \_\_\_\_\_ Business URL \_\_\_\_\_

BILLING ADDRESS  
(if different from mailing address)

Bill-to address \_\_\_\_\_  
 Check here if this is a change of address.  
City, State/Province, Zip/Postal code \_\_\_\_\_  
Country \_\_\_\_\_  
Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Home email \_\_\_\_\_

PAYMENT INFORMATION

NGWA member  Yes, membership# \_\_\_\_\_  
My \$ \_\_\_\_\_ subscription fee is enclosed (in U.S. funds).  
 Check/Money order (payable to NGWA) # \_\_\_\_\_  
Credit card:  American Express  MasterCard  Visa  Discover Company card?  Yes  No  
Credit card number \_\_\_\_\_ Printed name \_\_\_\_\_  
Expiration date \_\_\_\_\_ Signature \_\_\_\_\_