

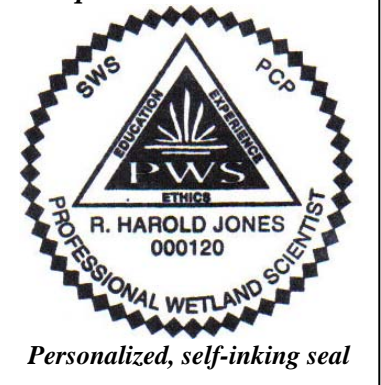


## PROFESSIONAL WETLAND SCIENTISTS

*Society of Wetland Scientists Professional Certification Program*

### PWS Seal Order Form

*Sample:*



Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

PWS #: \_\_\_\_\_

Please specify how you want your name on your seal (Middle Name, Ph.D., M.S., etc):

\_\_\_\_\_

**Total Cost of Seal + Shipping: \$45.00**

*Effective February 1, 2010*

Payment Method:  Check  Credit Card (Visa or MasterCard Only)

*Please make checks payable to SWSPCP. Checks made out to SWS will be returned.*

Name on Credit Card: \_\_\_\_\_  Visa  MasterCard

Card Number: \_\_\_\_\_

Card Expiration Date: \_\_\_\_\_ 3-digit security code: \_\_\_\_\_

Billing Address of Cardholder: \_\_\_\_\_

**Please send this form along with payment to:**

**SWSPCP Business Office**

**1901 North Roselle Rd, Suite 920, Schaumburg, IL 60195**

**If using a credit card, you can fax to (847) 885-8393**

1901 N. Roselle Rd. • Suite 920 • Schaumburg, IL 60195  
Phone: (847) 885-1839 • Toll Free (877) 226-9902 • Fax: (847) 885-8393