

University of West Georgia Nursing Student Name Badge Order Form

1) Print Name as it will appear on the name badge (First & Last Name).

2) Are you currently a licensed Registered Nurse (RN)? Yes No

3) Are you seeking to become a licensed Registered Nurse? Yes No

4) Select which Program you are enrolled in. BSN MSN

5) How many name badges total would you like to order? _____

(a) How many of these will be Pin Clasp Backings? _____

(b) How many of these will be Magnetic Style Backings? _____

6) COST DETAILS: Total Badges Ordered _____ x \$9.00 each = Total \$ _____

7) Are we Mailing this order to you? Yes, \$5.00 No, \$0.00

If Yes, provide Mailing Address: _____

8) SUB-TOTAL COST: Total on Line 6) \$ _____ + Line 7) \$ _____ = \$ _____

9) TOTAL COST: Total on Line 8) \$ _____ x Tax 7% (.07) \$ _____ = \$ _____

10) PAYMENT OPTIONS:

(a) Provide a Telephone Number in the event we may need to contact you.

(b) CHECK:

Driver's License# _____ Exp. Date _____

(c) CREDIT CARD:

Card# _____ Exp. Date _____

Name on Card _____

Billing Address _____

11) PLACING ORDER: Orders are to be placed with **McEver's Awards, Trophies & Gifts, 213 Bradley Street, Carrollton, GA 30117, Ph. 770-834-0077, Mon.-Fri. 9am-5:30pm. Please allow 10 Business Days to process your order.**

(a) CHECK: Make check payable to **McEver's Awards, Trophies & Gifts** for amount shown in Total Due from Line 9).

Mail Check and Order Form to: **213 Bradley Street, Carrollton, GA 30117**

(Mailed via US Postal Service) **Do Not Mail this form to the UWG School of Nursing.**

(b) CREDIT CARD: Email Order Form to **sales@mceversawards.org** or Fax Order Form to **Fax: 770-834-5870.**