

## ICGC DIRECTORY AUTHORIZATION (RC.2)

*To be completed by applicant*  
**Please print or type all information**

The Certification Board has authorized the National Council on Problem Gambling to offer a directory of ICGC counselors. This directory will be maintained on the NCPG website, and only limited numbers of hard copies will be produced. In order to ensure our records are accurate, please fill out the form below to have your name included in the directory. Please note this directory will remain property of the Certification Board and will not be used or sold without their permission.

\_\_\_\_\_ No, I do not wish to be listed in the ICGC Directory.

\_\_\_\_\_ Yes, please include me in the ICGC Directory.

\_\_\_\_\_ Please contact me with continuing education opportunities.

(Please list the information below as you wish it to appear in the directory)

Prefix \_\_\_\_\_ Name \_\_\_\_\_

Credentials \_\_\_\_\_

Agency \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

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Signature

Date

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**Return this form directly to:**  
National Council on Problem Gambling  
730 11th Street, NW, Suite 601  
Washington, DC 20001