



# Application for Third Party Mailing

The College of Registered Nurses of Manitoba attempts to fill requests for third party mailings as long as they provide a benefit for either registered nurses or the profession of nursing.

The College does not provide mailing lists under any circumstances. All mailings will be sent on your behalf and the privacy of RNs is protected at all times. A cover memo or introductory paragraph will be added to all mailings.

For electronic mailings, please allow up to three weeks to facilitate your request. For Canada Post mailings, please allow up to six weeks.

**A copy of your ethical approval must accompany this form.**

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## Study Information

Contact name: \_\_\_\_\_

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

Educational institution: \_\_\_\_\_

Name of study: \_\_\_\_\_

Brief overview of study: \_\_\_\_\_

\_\_\_\_\_

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## Mailing Logistics

I will be sending the mailing: \_\_\_\_\_ by email \_\_\_\_\_ by Canada Post

Number of mailings: \_\_\_\_\_ Date of first mailing: \_\_\_\_\_

Dates of follow-up mailings (if applicable): \_\_\_\_\_

## Target Audience

We can target groups of RNs and RN(NP)s based on the criteria below. Searches for more than three criteria may incur additional charges. Please check all boxes that apply to your study.

- Register: \_\_\_\_\_ RN or \_\_\_\_\_ RN(NP)
- Home address by city/town or postal code (specify: \_\_\_\_\_)
- Gender: \_\_\_\_\_ male or \_\_\_\_\_ female
- Location of nursing education: \_\_\_\_\_ Canada or \_\_\_\_\_ outside Canada
- Other (specify: \_\_\_\_\_)
- Area of nursing practice:
  - Medical/surgical
  - Mental health/psychiatric
  - Pediatrics
  - Maternal/newborn
  - Geriatric/long term care
  - Critical care
  - Community health
  - Rehabilitation
  - Chronic care
  - Other direct care
  - Public health
  - Ambulatory care
  - Continuing care/home care
  - Occupational health
  - OR/RR
  - Emergency care
  - Several clinical areas
  - Oncology
  - Palliative care
  - Telehealth
  - Nephrology

*Please note that most search criteria is provided by RNs voluntarily during registration renewal each year and may not be current at the time of your request. We will do our best to target the group of RNs you wish to reach.*

## Billing and Payment

Invoices are dated and sent on the same day your mailing is sent. Payment is due upon receipt of invoice and can be made by cheque or credit card. You will receive invoices for each mailing date (i.e. if you send an initial email and three follow-up emails, you will receive four separate invoices.)

### **Please return this form to:**

Arrie Sturdivant, Communications Specialist  
[asturdivant@crnm.mb.ca](mailto:asturdivant@crnm.mb.ca)

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## For Office Use Only

Approved by Manager of Communications: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Approval date: \_\_\_\_\_