



CERTIFICATE OF COMPLETION- MEMBER RIGHTS AND RESPONSIBILITIES TRAINING

I CERTIFY THAT I HAVE TAKEN THE MEMBER RIGHTS AND RESPONSIBILITIES
TRAINING AND THAT I UNDERSTAND HOW TO USE THE INFORMATION.

Completed this ____ day of _____, 20__

Please insert your name and date e-mail a copy of this certificate to

Larue.leffingwell@northeastbho.org

Or fax to
970-392-1354