

# CVMA Rabies Tags

## 2018 Rabies Tag and Certificate Order Form

**Order deadline is September 13, 2017.**

Rabies tags will be delivered to your clinic via UPS. Payment must accompany order.

*Please print legibly and complete both sides of this form.*

\_\_\_\_\_  
Hospital/Clinic Name

\_\_\_\_\_  
Veterinarian's name (**must** be a current CVMA member)

\_\_\_\_\_  
Rabies contact name (if different from veterinarian listed above)

\_\_\_\_\_  
Clinic street address (where tags are to be delivered; no P.O. boxes)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**Please indicate below how you wish to have the back of your rabies tags personalized.**

- The front of each tag will include the year of issue, "CVMA Rabies," and the ID number. It will also indicate if it is a one-year tag or three-year tag.
- Dog tags will include the name (clinic or DVM) and phone number indicated below. Cat tags will include the clinic phone number only because of space restrictions.
- CVMA cannot guarantee that ID numbers within a clinic will not repeat from year to year.

Line 1 \_\_\_\_\_ (14 spaces max.)

Line 2 \_\_\_\_\_ (16 spaces max.)

Line 3 \_\_\_\_\_ (16 spaces max.)

Line 4 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (phone number with area code - REQUIRED)

Example:

X Y Z    A N I M A L  
H O S P I T A L  
D E N V E R    C O  
3 0 3 - 3 1 8 - 0 4 4 7

*Sample dog tag (not actual size)*



Front



Back

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Item (Note: 1 ream = 100 tags)	Price per ream	Quantity	Subtotal
<b>Cat Tags</b>			
Reams(s) of 1 year tags (blue aluminum circle)	\$18.00		\$
Reams(s) of 3 year tags (stainless steel circle)	\$48.50		\$
<b>Dog Tags</b>			
Reams(s) of 1 year tags (blue aluminum rosette)	\$18.00		\$
Reams(s) of 3 year tags (stainless steel rosette)	\$48.50		\$
<b>Rabies Certificates</b>			
1 sheet = 4 certificates	\$0.65/sheet		\$
<b>SUBTOTAL</b>			\$
<b>Colorado Sales/RTD/CD Tax 4%</b> (multiply SUBTOTAL x .04)			\$
<b>TOTAL</b>			\$

Would you like S-Hooks with your tags?  Yes  No

### Payment Information

**SHIPPING IS FREE WITH YOUR ORDER!**

- Payment must accompany order.
- No refunds for unused tags or certificates.

Check enclosed (payable to CVMA) **OR** Charge to my  Visa  MasterCard  Discover  AMEX

Account Number Exp Date Security Code

Full Billing Address

Name as it appears on card Signature

Fax or mail both sides of this form, with payment, to:  
CVMA, 191 Yuma Street, Denver, CO 80223 • Fax 303.318.0450