

For fast and accurate service, please use black ink and print legibly!

Registrant Name DVM VMD CVT Other _____ Guest Name (must be non-veterinarian/non-veterinary technician) _____

Badge Name _____ Hospital / Clinic _____

Address _____ City _____ State _____ Zip Code _____

Work / Mobile Phone _____ Email Address _____

Registration Fees	By 11/26/2018	After 11/27/2018	Registration Total
CVMA Member Premium	\$505	\$605	
CVMA Member Premium (with discount coupon)*	\$405	\$505	
CVMA Member Core	\$529	\$629	
CVMA Member Basic	\$580	\$680	
AAHA Member	\$529	\$629	
Non-Member	\$729	\$829	
Technician / Students	\$279	\$379	
		TOTAL	\$

* **Premium members** who wish to use their \$100 discount coupon must mail registration form along with their discount coupon to CVMA, or register online and enter your discount coupon's promo code during checkout. Promo code is printed on the lower right hand corner of coupon.

CVMA/AAHA Welcome Reception Sunday, January 27 – 6:00 PM	Yes, I will attend	No, I won't attend	Total
CVMA/AAHA Reception - Paid attendee			
CVMA/AAHA Reception - Guest ticket			
		TOTAL TICKETS	

Please note:

- Breakfasts and afternoon breaks are provided for paid registrants only. Guests are **not** included.
- Guest and children are not allowed in classroom.
- **Dietary restriction?** _____

Payment Information Check enclosed (payable to CVMA) **OR** Charge my Visa MasterCard Discover AmEx

Card Number _____ Exp Date _____ Security Code _____

Full Billing Address for Card _____ City/State/Zip _____

Name As It Appears on Card _____ Signature _____ Date _____

Onsite registrations will be accommodated on a space availability basis, but cannot be guaranteed.

Cancellations must be submitted in writing and received by CVMA by January 4, 2019 to receive a full refund minus a \$50 processing fee. No refunds for cancellations after this date or for no-shows.

Questions? Contact us at 303.318.0447 or 800.228.5429

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