

# CVMA Rabies Tags

## 2020 Rabies Tags and Certificates Order Form

Lock in 2019 prices if you order by September 30, 2019! *Prices increase after this date.*  
 Rabies tags will be delivered to your clinic via UPS.

\_\_\_\_\_  
 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 or three-year tag.
- Dog tags will include the name (clinic or DVM) and phone number indicated below. Cat tags will **only include the clinic phone number** because of space restrictions.
- Although we do our due diligence in ensuring tag numbers are not repeated, CVMA cannot guarantee that ID numbers within a clinic will not repeat from year to year.

Line 1 \_\_\_\_\_ (16 characters max.)

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

Line 3 \_\_\_\_\_ (14 characters 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). Note: Image only has 3 lines showing, you will have 4 lines of customization.*



Front



Back

# CVMA Rabies Tags

Item (Note: 1 ream = 100 tags)	Price per ream	Quantity	Subtotal
<b>Cat Tags</b>			
Reams(s) of 1 year tags (red aluminum circle)	\$20.00		\$
Reams(s) of 3 year tags (stainless steel circle)	\$50.00		\$
<b>Dog Tags</b>			
Reams(s) of 1 year tags (red aluminum heart)	\$20.00		\$
Reams(s) of 3 year tags (stainless steel heart)	\$50.00		\$
<b>Rabies Certificates</b>			
1 sheet = 4 certificates	\$0.65/sheet		\$
SUBTOTAL			\$
<b>**Pick one of the tax rates below based on location of clinic (BY COLOR) Tax rate listed below**</b>			
[CITY OF DENVER] CO Sales/RTD/CD/City of Denver Tax 8.31% (multiply SUBTOTAL x .0831)			\$
[FRONT RANGE] Colorado Sales/RTD/CD Tax 4% (multiply SUBTOTAL x .04)			\$
[COLORADO] Colorado Sales Tax 2.9% (multiply SUBTOTAL x .029)			\$
TOTAL			\$

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

**SHIPPING IS FREE WITH YOUR ORDER!**

**Tax calculations:**

- If your clinic's address is listed in Denver, calculate tax on the BLUE line.
- If your clinic's address is in one of the following counties (Adams, Arapahoe, Boulder, Broomfield, Douglas (excluding Castle Rock and Larkspur) and Jefferson), calculate tax on the RED line.
- If your clinic's address is not in Denver or one of the above counties, calculate tax on the YELLOW line.

**Payment Information**

No refunds for unused tags or certificates.

Check (payable to CVMA)

Credit Card: Once we receive your form, we will send you an invoice to pay securely online. Please do not provide card information on this form.

Email address you'd like the invoice sent to (if different than above):

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