



Please print/type your name clearly as you would like it to appear on your badge, circling the appropriate salutation below.

Full Name: Dr. / Mr. / Ms. _____

Company (If Applicable): _____

Preferred Address: Home Work _____

City: _____ State: _____ ZIP: _____

E-Mail: _____ Phone: _____ Fax: _____

School Attended/Attending: _____ Year of Graduation: _____

Special Accommodations (If Applicable): _____

Check here if you **do not** wish to include your e-mail address in your electronic badge for use in the Exhibit Hall.

Join Now!

If you are not yet an OVMA Member, please fill out the section below to join. Student Members attend the MVC for FREE, and Resident/Intern Members enjoy a reduced rate. Learn more about the benefits of membership online at www.ohiovma.org/membership.html.

Veterinary Student Member

Please select your predicted date of graduation to determine your dues. 2012: \$7 2013: \$14 2014: \$21 2015: \$25

NOTE: OVMA Student Membership is available to veterinary students who reside in Ohio and/or are attending The Ohio State University College of Veterinary Medicine.

Post-Graduate Resident/Intern: \$50

Supervisor Name: _____

Registration Type

Pre-Veterinary Students: \$20 (Not attending the Veterinary Exploration Conference. Please register for the VEC online at www.mvcinfo.org/VEC.html)

Veterinary Students: OVMA Member: No charge Non-Member: \$20

Technician Students: SCNAVTA Member: No charge Non-Member: \$20

Post-Graduate Residents/Interns: OVMA Member: \$75 Non-Member: \$100

Company/Organization/Institution: _____

Special Events

Please select any additional events you would like to attend.

Veterinary Student Appreciation Reception (N/C) MVC Live! (\$15) Qty: _____ Friday Boot Camp (N/C) Saturday Boot Camp (N/C)

Emergency Contact Information (Optional)

Name: _____ Relationship: _____

Phone Number: _____ Alternate Phone Number: _____

Payment Information

Visa Mastercard Discover Check made payable to OVMA (Sorry, we cannot accept American Express.)

Card Number: _____ Expiration Date: _____

Card Holder Name: _____ CVV: _____

Cardholder Signature: _____ GRAND TOTAL DUE: \$ _____

Cancellation Policy. If personal or professional circumstances prevent you from attending the Conference, the OVMA will refund your Conference registration fees, less a \$50 administrative fee. A written refund request must be received by 6 p.m. EST on **March 14, 2012**. No refunds can be granted after this date. No refunds can be granted for wet labs, workshops or entertainment functions. Written refund requests may be delivered to the OVMA via mail, fax or e-mail.

Privacy Disclosure. The OVMA will not release your contact information to non-exhibiting companies. Please be aware that the contact information you provide will be encoded into your attendee badge and may be obtained by Exhibitors.

Consent to be Photographed. By registering for the Conference, you grant permission for your photograph to be taken and used in future marketing materials.

Please register by Feb. 10, 2012. After this date, you may register on site.

Online: www.mvcinfo.org Mail: OVMA, 3168 Riverside Dr. Columbus OH 43221 Fax: 614.486.1325 (Please do not mail a duplicate form if faxing.)