



veterinarian or veterinary student registration

March 16 - 18, 2012
Oregon State University
Corvallis, Oregon

Use one form per registrant and spouse/guest please. Photocopy if needed.

Name _____
 Clinic _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Phone _____
 E-mail _____
Include an e-mail address above to be notified when the proceedings are available on the OVMA Web site. Please print clearly.

Veterinarian or Veterinary Student
Full Conference Registration
 OVMA Member (reflects 30% discount) \$335 \$ _____
 Other VMA Member (not living in OR) \$335 \$ _____
 All Other Veterinarians \$480 \$ _____
 OVMA Life Member \$100 \$ _____
 CVM Student \$0 (CVM underwriting first 50 reg.) \$ _____

Single Day Conference Registration
 Friday Saturday Sunday (see Sunday only fee)
 OVMA Member (reflects 30% discount) \$235/\$140 Sun. only . \$ _____
 Other VMA Member (not living in OR) \$235/\$140 Sun. only . \$ _____
 All Other Veterinarians \$330/\$195 Sun. only \$ _____
 OVMA Life Member \$100 \$ _____
 CVM Student \$0 (CVM underwriting first 50 reg.) \$ _____

Spouse or Guest
 Registration \$100 \$ _____
 Name for Badge: _____
Note: Please register as staff if you work in the veterinary practice.

SCAVMA Dinner
 Dinner \$30 (x _____ tickets) \$ _____
 Sponsor a CVM student to attend \$30 (x _____ tickets) ... \$ _____
 Donation to OSU SCAVMA \$ _____

Mark the Sessions You Plan to Attend
 To aid us in room setup, please mark the sessions you plan to attend:
Friday Companion 1 (AM) Companion 1 (PM)
 Companion 2 (AM) Companion 2 (PM) Equine
 Food Animal Leadership (AM) Leadership (PM)
Saturday Awards Luncheon -OR- Box Lunch (Choose one.)
 Companion 1 (AM) Companion 1 (PM) Companion 2 (AM)
 Companion 2 (PM) Companion 3 (PM)
 Equine Food Animal Animal Welfare (AM)
 Leadership 1 (AM) Leadership 2 (AM) Leadership 2 (PM)
 Tech./Asst. 1 (AM) Tech./Asst. 1 (PM) Tech./Asst. 2 (AM)
 Tech./Asst. 2 (PM) Tech./Asst. 3 (AM) Tech./Asst. 3 (PM)
Sunday Companion Equine Leadership/Healthcare
 Tech./Asst. 1 Tech./Asst. 2

Food & Mixed Animal Practitioners
 Check if you will attend Saturday's breakfast. **Sponsored by Pfizer.**

Late Fee
 Add \$25 for registrations postmarked or faxed **after February 29, 2012.**
Late Fee \$25 (after February 29) \$ _____

Total Fees \$ _____

Payment Method
Check: Make check payable to OVMA.
 Check # _____ Amt. _____ Rcvd. _____
Credit Card: Visa MasterCard
 No. _____ Exp. _____
 3-Digit Verification Number _____ Billing Zip Code _____
 Signature _____

How to Register
Registrations accepted at the OVMA office until March 14 at 5 pm.
 After that date, please bring your registration form and payment (including late fee) to conference registration onsite.
 1) Mail the top sheet of this form to:
 OVMA, 1880 Lancaster Dr. NE, Ste. 118, Salem, OR 97305
 2) Fax to: (503) 363-4218

Refund & Cancellation Policy
No cancellations and/or refunds will be honored after February 29, 2012. 15% of the total to be refunded will be deducted for processing. Mail or fax your cancellation notice to the OVMA by February 29.

Special Needs
 If you have special needs or dietary requirements, please indicate below and return this form by **February 29, 2012.**

Proceedings
 The proceedings will be available to registrants on the OVMA Web site at least 2 weeks before the meeting. You are encouraged to print the notes for the sessions you plan to attend and bring them with you to the conference. **To receive an e-mail when the proceedings are available, please include your e-mail address on this form. Your confirmation postcard will also include the login information needed to access the proceedings on the OVMA Web site.**

Questions?
 Contact the OVMA at (800) 235-3502 or ovc@oregonvma.org.