

1 ATTENDEE INFORMATION

AVMA Membership ID#: _____

First Name _____ Last Name _____

Check Degree: CVT DVM LVT PhD RVT VMD Other _____

Practice/Company/University _____

Address _____

City and State/Province _____ Postal Code _____

Email _____ Country _____

Phone _____ Fax _____

Is this your Business or Personal Address? If your address changes prior to the convention, please contact avma@wyndhamjade.com or 888-295-4523/972-349-5813, or update your information online by clicking the edit link in your email confirmation. Visit avma.org/update to update your AVMA profile information.

2 REGISTRATION FEES

SELECT YOUR REGISTRATION TYPE	Advance by May 23	Standard After May 24
FULL CONVENTION		
<input type="checkbox"/> AVMA Member Veterinarian	\$550	\$650
<input type="checkbox"/> AVMA Honor Roll/Retired Member	\$450	\$525
<input type="checkbox"/> Member of Foreign Veterinary Medical Association	\$550	\$650
<input type="checkbox"/> AVMA Member 2018 Veterinary Graduate	\$0	\$0
<input type="checkbox"/> Recent Graduate ¹ 2013-2017 – One Time Only	\$0	\$0
<input type="checkbox"/> Veterinary Student ² <input type="checkbox"/> SAVMA Member <input type="checkbox"/> Non-Member	\$0	\$100
<input type="checkbox"/> Non-AVMA Member Veterinarian	\$775	\$875
<input type="checkbox"/> Veterinary Technician	\$300	\$350
<input type="checkbox"/> Veterinary Technician Student ²	\$0	\$100
<input type="checkbox"/> Non Veterinarian	\$300	\$350
<input type="checkbox"/> Practice Staff	\$300	\$350
SINGLE DAY REGISTRATION		
<input type="checkbox"/> AVMA Member Price Per Day <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN <input type="checkbox"/> MON/TUES	\$275	\$275
<input type="checkbox"/> Non AVMA Member Price Per Day <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN <input type="checkbox"/> MON/TUES	\$400	\$400
<input type="checkbox"/> Veterinary Technician Price Per Day <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN <input type="checkbox"/> MON/TUES	\$200	\$200
<input type="checkbox"/> Non Veterinarian Price Per Day <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN <input type="checkbox"/> MON/TUES	\$200	\$200
<input type="checkbox"/> Practice Staff Price Per Day <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN <input type="checkbox"/> MON/TUES	\$200	\$200
LAB AND EXHIBIT HALL ONLY REGISTRATION		
<input type="checkbox"/> Lab and Exhibit Hall Only Registration	\$150	\$150
TOTAL		

3 GUESTS³

GUEST(S) OVER 18: \$60		
<input type="checkbox"/> First _____ Last _____		
<input type="checkbox"/> First _____ Last _____		
<input type="checkbox"/> First _____ Last _____		
CHILDREN (UNDER 18): \$0		
<input type="checkbox"/> First _____ Last _____ Age _____		
<input type="checkbox"/> First _____ Last _____ Age _____		
<input type="checkbox"/> First _____ Last _____ Age _____		
TOTAL		

4 EVENTS

Please indicate if you plan to attend the following events. Guest registration is required for additional event tickets.

Friday, July 13

Candidates' Introductory Breakfast

Hyatt Regency Denver

7:00-8:30am (time subject to change)

\$50 Qty _____ \$ _____

Saturday, July 14

AVMA Keynote

Colorado Convention Center

10:00am-noon

Sunday, July 15

Auxiliary Membership Luncheon

Location TBD

12:00-1:30pm (time subject to change)

Adults \$75 Qty _____ \$ _____

Under 18 years \$35 Qty _____ \$ _____

AVMA Concert sponsored by: 

Sculpture Park

6:30-9:30pm

Adult \$10 Qty _____ \$ _____

Under 18 years \$0 Qty _____

TOTAL _____

Due to frequent updates in Interactive Lab and Workshop offerings we are unable to support registration via this form. To register for Interactive Labs and Workshops please register online or contact us at 888-295-4523/972-349-5813. The most up to date lab offerings can be viewed at avmaconvention.org.

5 CONVENTION HANDOUTS USB

An electronic copy of the Convention Handouts, reference documents created by speakers for their sessions, is included with your registration and will be available on the convention website and via the AVMA Convention app on your smartphone or other mobile device.

If you would like a physical copy, purchase a USB below. CDs are not produced.

\$55 Qty _____ \$ _____

TOTAL _____

¹ AVMA accredited Veterinary school graduates, upon joining the AVMA, are eligible for one complimentary AVMA Convention registration within five (5) years from the date of graduation (year of graduation 2013-2017). Eligibility will be verified from AVMA membership records.

² Students working towards a Veterinary degree and Veterinary Technician Students. Non-SAVMA Member Students must present school ID when picking up registration materials onsite.

³ AVMA welcomes guests and children of attendees to participate in some events. Guests and children are not permitted to attend continuing education classes.

6 DEMOGRAPHIC QUESTIONS

Response required to process your registration.

1. What is your current employment type?

(Choose one that best fits)

- Private Clinical Practice
- Academia
- Government
- Industry/Commercial
- Temporarily Not Employed in Veterinary Field
- Non-Veterinary Employment
- Not Employed/Retired
- Other (please specify) _____

2. Which best describes your current professional role?

(Choose one that best fits)

- Practice Owner/CEO/President/Vice-President
- Dean/Professor
- Director/Assistant Director
- Practice Manager/Support Staff
- Veterinarian
- Veterinary Technician
- Associate
- Relief
- Marketing/Brand Manager/Account Manager
- Sales/Business Development Consultant/Recruiter
- Student/Intern/Residency
- Retired
- Other (please specify) _____

Not Applicable

3. What is your primary species category?

(Choose one that best fits)

- Food Animal Predominant
- Food Animal Exclusive
- Companion Animal Predominant
- Companion Animal Exclusive
- Multiple Species
- Equine Predominant
- Equine Exclusive
- Poultry
- Avian/Exotics
- Other (please specify) _____

Not Applicable

4. Please check products and services of interest.

(Choose all that apply)

- Anesthesia Equipment
- Animal Identification
- Animal Restraints – Cages & Kennel Systems
- Animal Wellness
- Bandaging
- Behavior Products
- Bovine Products
- Client Communication/Marketing
- Computer Hardware/Software
- Dental Technology/Supplies
- Dermatologics
- Diagnostic Consultant
- Diagnostic Technology & Services

- Digital X-ray
- Education Training/Video
- Employment Opportunities
- Endoscopy
- Equine Products
- Equipt., Drugs, & Supply Distr.
- Exam & Operating Room Equipment
- Exotic Animal Products
- Facility/Design Services
- Grooming, Bathing & Clipping
- Immunotherapy
- Insurance Group
- Joint Care
- Laboratory Diagnostic Services
- Laboratory Equipment & Supplies
- Laser Technologies
- Lighting & Illumination
- Medical Supplies/Equipment
- Nutritional Supplements
- Oncology
- Ophthalmology
- Pain Management
- Parasiticides/Tick, Flea, Mosquito Control Prod.
- Patient Monitoring Equipment
- Pet Nutrition/Food
- Pet Products & Supplies
- Pharmaceutical
- Practice Acquisitions
- Practice Financing/Lending
- Practice Management Services
- Protective Wear
- Publications/Publishers
- Radiology Technology
- Record Management/Chart
- Scrubs/Uniforms
- Surgical Equipment/Instruments
- Ultrasound Technology
- Veterinary Management Services
- Other (please specify) _____

5. What is/are your primary reason(s) for attending the AVMA Annual Convention 2018? (Select up to 5)

- Alumni Receptions
- Associated Group Meeting(s)
- Quality of Continuing Education Program
- CE Hours to Renew Veterinary/Technician License
- Proximity of Denver to Home
- Vacationing in Denver
- Special Events (ie: Keynote, Concert...)
- Exhibiting/Exhibit Hall
- Speaker/Presenter/Panelist
- House of Delegates/Business Sessions
- SAVMA/SCAVMA Related Meetings
- Networking/Career Opportunities
- Veterinary Technician Program
- Wellbeing Programs
- Other (please specify) _____

AVMA registration

6. Do you have involvement with purchasing veterinary products/services?

Yes No

6a. If yes, what is your role in the purchasing decision?

Influence Recommend
 Final decision maker

6b. If yes, do you intend to purchase a veterinary product/service within the next 12 months?

Yes No

6c. What is your organization's annual purchasing power as it relates to veterinary products and services? (Choose one that best fits)

\$0 - \$50,000
 \$50,001 - \$250,000
 \$250,001 - \$750,000
 \$750,001 - 1,500,000
 \$1,500,001 - \$2,500,000
 \$2,500,001 - \$5,000,000
 \$5,000,000 - \$10,000,000
 \$10,000,001+

7. How long have you worked in the field of veterinary medicine?

Less than 5 years 16-20 years
 5-9 years More than 20 years
 10-15 years

8. Based on your experience, do you feel AVMA dues are...

An excellent value A poor value
 A good value Don't know
 A fair value

9. On a scale from 1 to 10, where 1 is not at all important and 10 is essential, how important is it for a veterinary organization to provide the following services... (Please circle a number)

a. Publicly promote the value that veterinarians provide to society
1 2 3 4 5 6 7 8 9 10

b. Publicly promote the role of veterinarians in animal welfare
1 2 3 4 5 6 7 8 9 10

c. Protect the reputation of the profession and advocate on behalf of veterinarians
1 2 3 4 5 6 7 8 9 10

10. Are you active duty military?

Yes No

11. Please indicate your gender.

Male Female Other Prefer not to answer

12. Please indicate your age range.

Under 30 30-39 40-49 50-59 60-69
 70-79 80-89 90 or Over

13. First time Attendee? Yes No

13a. If yes, would you like to participate in our Convention Mentor Program? You will be matched up with a Convention Mentor to help you Navigate your first Convention!

Yes No

13b. If no, would you like to serve as a Convention Mentor to a First Time Attendee to help them navigate their first Convention?

Yes No

ASSOCIATED GROUP ATTENDANCE. If you are attending an associated group meeting, please list your group affiliation(s):

EMERGENCY CONTACT:

Name: _____

Relationship: _____

Phone Number: _____

SPECIAL ASSISTANCE. Pursuant to the Americans with Disabilities Act, do you require specific aids or services?

ADA Needs: _____

Onsite Phone Number: _____

LIVE ANIMALS. Are you planning on bringing a service animal, or an animal to be used for demonstration in the Exhibit Hall and/or Interactive Lab?

Yes No

If yes, please contact convention@avma.org for additional instructions.

Do you want to be included on the pre and post-convention attendee postal mailing list that is provided to exhibitors? Please note, your phone number and email address will not be distributed.

Yes No

7 TOTALS & PAYMENT INFORMATION

Registration Fees	Total From Step 2	\$ _____
Guests	Total From Step 3	\$ _____
Events	Total From Step 4	\$ _____
Convention Handouts USB	Total From Step 5	\$ _____
Loyalty Discount*		- \$ _____
Promo Code(s) _____		- \$ _____

*Loyalty Discount is \$25 if you attended 2017 Convention. **TOTAL**

\$50 if you attended 2016 and 2017 Conventions.
\$75 if you attended 2015, 2016, and 2017 Conventions.
\$100 if you attended 2014-2017 Conventions.
Eligibility will be verified. Discount applies to members who paid registration fees for previous years.

Check (Check enclosed in US funds drawn on a US bank made payable to AVMA.)

Mail	Phone
AVMA	: 1-888-295-4523
Attn: Annual Convention	: (US Residents only)
1931 N. Meacham Rd., Suite 100	:
Schaumburg, IL 60173-4360	: 1-972-349-5813

CANCELLATION AND REFUNDS: Cancellations must be submitted in writing by **Friday, June 8, 2018** no later than 5:00 pm CST and will incur a \$75 fee. No refunds will be issued if postmarked after **Friday, June 8, 2018**.

Submit cancellations to:
Mail: AVMA c/o Wyndham Jade
6100 W. Plano Parkway, Suite 3500, Plano, TX 75093
Fax: 972-349-7715 Email: avma@wyndhamjade.com

By registering and checking this box, I hereby acknowledge that I have read and agree to the terms outlined at www.avmaconvention.org.