



# 2011 ASV MEMBERSHIP APPLICATION

FULL NAME: \_\_\_\_\_

HOW DID YOU HEAR ABOUT ASV? \_\_\_\_\_

## EMPLOYMENT INFORMATION

COMPANY/ORGANIZATION \_\_\_\_\_

TITLE \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

CITY/STATE OR PROVINCE/ ZIP \_\_\_\_\_

COUNTRY \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

FAX \_\_\_\_\_

WEBSITE \_\_\_\_\_

## TYPE OF PRACTICE

PRIVATE SHELTER

MUNICIPAL SHELTER

SPAY/NEUTER

INDUSTRY

EDUCATION

PRIVATE PRACTICE

OTHER (please describe): \_\_\_\_\_

## RESIDENCE INFORMATION

HOME ADDRESS \_\_\_\_\_

CITY/STATE OR PROVINCE/ ZIP \_\_\_\_\_

COUNTRY \_\_\_\_\_

HOME PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_

## ADDITIONAL INFORMATION

SCHOOL \_\_\_\_\_

YEAR OF GRADUATION \_\_\_\_\_

DEGREES \_\_\_\_\_

VETERINARY LICENCE # \_\_\_\_\_

STATE \_\_\_\_\_

ARE YOU A MEMBER OF AVMA?  YES  NO

## COMMUNICATION PREFERENCES

PREFERRED EMAIL ADDRESS \_\_\_\_\_

MAILING ADDRESS:  HOME  BUSINESS

I would like to receive an invite to join the ASV Yahoo listerv group

Yahoo ID: \_\_\_\_\_

## PLEASE CHOOSE ONE:

Show all my information in the online membership directory  
(directory available to members only)

Only show my work information in the online membership directory  
(member only access)

Only show my home information in the online membership directory  
(member only access)

Do NOT show any of my information in the online membership directory  
(directory available to members only)

## MEMBERSHIP TYPE

Memberships are by calendar year, applications received after October 1 will be applied toward the next year.

Renewal  New Membership

\$75 ACTIVE MEMBERSHIP – VETERINARIAN

\$15 AFFILIATE MEMBERSHIP – NON-VETERINARIAN

\$5 VETERINARY STUDENT MEMBERSHIP

## DUES PAYMENT

Pay by credit card below or make checks payable to "ASV" and mail to:  
1666 K Street, NW, Ste. 260, Washington, DC 20006.

VISA

MASTERCARD

AMERICAN EXPRESS

NAME AS IT APPEARS ON CREDIT CARD \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_

EXP. DATE \_\_\_\_\_

CVV# (3 DIGITS ON BACK OF CARD) \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY/STATE OR PROVINCE/ ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_