



2019 Early **Registration Form** This registration form is valid until October 31, 2018.

3 WAYS TO REGISTER

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BY EMAIL: Email form to registration@wvc.org



702.739.6420 For security reasons, no telephone registrations will be accepted.



WVC PO Box 50755

PLEASE READ BEFORE COMPLETING FORM

2019 registration includes complimentary digital access to Conference Notes.

- ▶ Registration is nontransferable.
 - Only one registration per form (photocopy as needed). Complete both sides of this form.

BY MAIL:

Henderson, NV 89016

All fields with * are required. To review WVC's Terms & Conditions, please visit our website at www.wvc.org.

▶ PRIMARY PARTICIPANT INFORMATION Please Print (Minimum age for all registrants: 18)

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| * 🗖 Dr. 🗖 Mr. 🗖 Ms. 🗖 Mrs. | | | | | |
|--|---|---|--|--|--|
| *Name | | | | | |
| Last Gender □ Male □ Female *Birthday | First (r | мі nm/yyyy) | | | |
| PREFERRED CONTACT INFORMATION | | | | | |
| *Primary Email | | | | | |
| *Preferred Phone: 🗖 Cell 🗖 Business Cell | Business | Fax | | | |
| Emergency Contact Name | Emergency Contact P | hone | | | |
| *Please select a preferred address: 🗖 Home 🛛 Busin | ess Business Name | | | | |
| Mailing Address | | Apt/Ste | | | |
| City Stat | te/Prov Zip/Postal Code | Country | | | |
| \square Do not include me in Exhibitor mailings. | | | | | |
| ► PROFESSIONAL INFORMATION (A graduate | e Veterinarian must register as a Veter | inarian.) | | | |
| *Participant Type: 🗖 Veterinarian 🗖 Veterinary Technicia | an 🗖 Veterinary Assistant 🗖 Practice M | lanager 🗖 Administrative Staff 🗖 General Attendee | | | |
| Degree(s) | | | | | |
| School Graduated | | Year Graduated | | | |
| *Classification: 🗖 Academia 🗖 Avian/Exotics (Exclusive) |) 🗖 Equine (Exclusive) 🗖 Food Animal I | (Exclusive) 🗖 General Attendee 🗖 Government | | | |
| □ Industry □ Mixed Practice (Avian & Exotics/Small Anim | nal) 🗖 Mixed Practice (>50% Small Anin | nal + Some Large Animal) | | | |
| Mixed Practice (>50% Large Animal + Some Small Anim | nal) 🗖 Small Animal (Exclusive) 🗖 Spec | cialty Practice 🗖 Not Applicable | | | |
| Veterinary Specialty | | | | | |
| How did you hear about us? 🗖 Direct Mail 🗖 Email 🗖 | Banner Ads 🗖 Other Conferences 🗖 I | ournals/Publications 🔲 Social Media 🔲 Past Attendee | | | |
| EMPLOYER INFORMATION Please fill out if y | | | | | |
| Employer Type: Academia Corporate Private F | | | | | |
| Practice Role: Owner Associate Intern/Reside | | | | | |
| | | | | | |
| Number of Veterinarians in your practice? | | ns in your practice ? | | | |
| Number of practices in group? | | | | | |
| Gross Annual Revenue in Practice/Group? C<\$1M | | | | | |
| Purchase Influence: Decision Maker Some Influence | ce 🗖 No Influence 🗖 Recommendatio | on Only | | | |

| Participant's Last Name | First Name | | | |
|--|--------------------|----------------------|--------------|----------------------------|
| ► FULL CONFERENCE (57 CE Credits) | Fee | Total Amount | | |
| Veterinarian | \$450 | \$ | | |
| Veterinarian - Retired (Age 65+) No CE Credit (Must show ID onsite and | \$195 | \$ | | |
| Veterinarian - First-year graduate (Must have graduated within 12 mont | \$195 | \$ | | |
| Veterinary Technician/Veterinary Assistant/Administrative Staff/Practice | \$325 | \$ | | |
| General Attendee - No CE Credit | \$325 | \$ | | |
| DVM Student - No CE Credit | \$55 | \$ | | |
| Guest Registration -NO CE or access to scientific sessions | \$55 | \$ | | |
| Dr. Dr. Mr. Ms. Mrs. Guest Name | | | | |
| Guest email (not shared) | | | | |
| 1-DAY CONFERENCE (5-12 CE Credits) | Fee | Total Amount | | |
| Veterinarian | \$340 | \$ | | |
| Veterinary Technician/Veterinary Assistant/Administrative Staff/Practice | \$225 | \$ | | |
| General Attendee (No CE Credit) | \$225 | \$ | | |
| (Please indicate day attending) Sunday Monday Tuesday HANDS-ON LABS (PLEASE PRINT OUT HANDS-ON LAB WAIVER FORM | | hursday | | |
| Lab # Fee \$ Lab # Fee \$ | Lab # | Fee \$ | _ | \$ |
| WORKSHOPS | | | | |
| WS # Fee \$ WS # Fee \$ | WS # | Fee \$ | _ | \$ |
| DONATION | | | | |
| Give back to the veterinary profession. Donate to help fund continuing e | ducation. WVC is a | a 501(c)3 non-profit | organizatio | on incorporated in Nevada. |
| Your donation may be tax deductible pursuant to the provisions of section | \$ | | | |
| TOTAL OF ALL FEES | | \$ | | |
| PAYMENT INFORMATION Please fill out completely. Foreign | registrants—WVC | accepts foreign dra | afts in U.S. | funds ONLY. |
| ■VISA ■ MasterCard ■ American Express ■ Discover ■ Check # | ŧ | | | |
| Card Holder Name | | | | |
| Credit Card Number | | Exp Date | | CSV# |
| Billing Address | | | | |
| City State/Prov | Zip/Postal Co | de | Country | |
| $^{*\Box}$ I have read and agree to the terms & conditions* (required prior to co | ompleting the regi | stration). | | |
| $^{*\Box}$ I authorize WVC to charge my card for the amount noted above. | | | | |
| Cardholder's Signature | | | | |

Email to send receipt _

CANCELLATION POLICY

- \$50 processing fee applies to Conference registration cancellations.
- \$25 processing fee applies to Guest badge cancellations.
- \$75 processing fee applies to all canceled Hands-on Lab. Full refund will be provided if a lab is canceled by WVC due to inadequate enrollment. Labs are transferable.
- Lunch & Learn/Workshops registrations are nonrefundable and nontransferable.
- \$25 badge replacement fee (replacement is only available onsite).
- Student registrations are nonrefundable.
- Cancellation requests must be received at the WVC Office in writing (via email/ fax/U.S. Mail) by January 31, 2019.
 - NO CANCELLATIONS ACCEPTED/ALLOWED AFTER February 1, 2019.

GUEST BADGE POLICY

Guest registration allows access to the Exhibit Hall, social activities, and entertainment events. DDES NOT include access to any scientific sessions. Guests who wish to attend scientific lectures must purchase an additional badge, registering in the appropriate category.

CHILD POLICY

Children under the age of 18 do not require a badge. A child may enter the Exhibit Hall and certain entertainment events if accompanied by a badged adult. Children under the age of 18 are not permitted in any scientific sessions.

BADGE ENCODING DISCLOSURE

As a WVC participant, your contact information is automatically encoded into your badge. When the badge is scanned in the Exhibit Hall, the encoding supplies your name, mailing address, email address, telephone number and fax number, if provided. This badge system should be used as a business card and scanned at your discretion.

PRIVACY DISCLOSURE

WVC will not release your contact information to non-exhibiting companies. As a Conference participant, your image may be captured and used for future promotional purposes.

*To review WVC's Terms & Condition, please visit wvc.org/legal.