

Full Name (will be printed on badge) _____

Clinic / Practice _____

Practice Type _____ College / Grad Yr. _____

Mailing Address _____

City _____ State _____ Zip _____

Email (required) _____ Phone _____

SELECT A REGISTRATION TYPE *One registrant per form.*

TECHNICIAN	by 12/31	after 12/31
OVTA Member Technician Registration	<input type="checkbox"/> \$80	<input type="checkbox"/> \$95
OVTA Non-Member Technician and Veterinary Assistant Registration	<input type="checkbox"/> \$100	<input type="checkbox"/> \$120

RABIES BOOSTER *Rabies Booster must be pre-ordered. Payment due on-site. Cost unknown until vaccine is ordered - approximately \$250.*

MEALS & EVENTS *(RSVP Required)*

* SATURDAY MEAL TICKETS ARE INCLUDED WITH REGISTRATION BUT ARE ONLY PROVIDED FOR THE ITEMS YOU SELECT BELOW.

LUNCHES	DIETARY REQUIREMENTS	TICKETED EVENTS
Friday, 1/25 Exhibit Hall Lunch <input type="checkbox"/> \$25	<input type="checkbox"/> Vegetarian <input type="checkbox"/> Gluten-Free <input type="checkbox"/> Vegan	<input type="checkbox"/> After Party - Friday, 1/25 @ 6:00 pm No. of Tickets _____ x \$90 ea. Total <input type="checkbox"/> \$_____
Saturday, 1/26* Membership Breakfast <input type="checkbox"/> FREE Exhibit Hall Lunch <input type="checkbox"/> FREE		<input type="checkbox"/> CVM Lunch - Saturday, 1/26 @ 12:30 p.m. No. of Tickets _____ x \$25 ea. Total <input type="checkbox"/> \$_____

PAYMENT INFORMATION

Total Amount \$ _____ Check Visa MasterCard American Express

Name on Card _____

Card Number _____ Exp. _____ CVC _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____

Cancellations must be written to: OVMA, PO Box 14521, Oklahoma City, OK 73113. No refunds after January 07, 2019. Refunds before that date will be less \$20. No refunds will be given on meal tickets. Registration confirmations will be sent by email only.

TO SUBMIT YOUR REGISTRATION:

Email: admin@okvma.org
 Fax: (405) 478-7193
 Mail: OVMA, PO Box 14521, Oklahoma, OK 73113

TECH

NOTE: One (1) guest registration per attendee. Guest must have badge to enter Exhibit Hall. Guest Registration is \$10.00
Guest registration is not intended for veterinarians, technicians or veterinary staff (even if CE credit is not desired).

ATTENDEE INFORMATION

Registered Attendee Name (required) _____

Attendee Registration Type: Veterinarian Veterinary Student Technician Office Staff

Clinic / Practice _____

Email (required) _____ Phone _____

GUEST REGISTRATION INFORMATION

Guest Name (will be printed on badge) _____

Email (required) _____ Phone _____

Guest Registration Fee \$10

This fee allows your guest to receive a Conference Badge, access to the Exhibit Hall, and any purchased meal events.

GUEST MEALS & EVENTS

<p>LUNCHES (Select a Fri. & Sat. option)</p> <p>Friday, 1/25</p> <p>Exhibit Hall Lunch <input type="checkbox"/> \$25</p> <p>Legacy Lunch <input type="checkbox"/> \$35</p> <p>Saturday, 1/26</p> <p>Membership Breakfast <input type="checkbox"/> \$30</p> <p>Saturday, 1/26</p> <p>Exhibit Hall Lunch <input type="checkbox"/> \$25</p>	<p>DIETARY REQUIREMENTS</p> <p><input type="checkbox"/> Vegetarian</p> <p><input type="checkbox"/> Gluten-Free</p> <p><input type="checkbox"/> Vegan</p>	<p>TICKETED EVENTS</p> <p><input type="checkbox"/> After Party– Friday, 1/25 @ 6:00p.m. No. of Tickets _____ x \$90 ea. Total <input type="checkbox"/> \$_____</p> <p><input type="checkbox"/> CVM Lunch – Saturday, 1/26 @ 12:30 p.m. No. of Tickets _____ x \$25ea. Total <input type="checkbox"/> \$_____</p>
---	---	---

PAYMENT INFORMATION

Total Amount \$ _____ Check Visa MasterCard American Express

Name on Card _____

Card Number _____ Exp. _____ CVC _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____

Cancellations must be written to: OVMA, PO Box 14521, Oklahoma City, OK 73113. No refunds after January 07, 2019. Refunds before that date will be less \$20. No refunds will be given on meal tickets. Registration confirmations will be sent by email only.

TO SUBMIT YOUR REGISTRATION:

Email: admin@okvma.org
Fax: (405) 478-7193
Mail: OVMA, PO Box 14521, Oklahoma, OK 73113

GUEST