

REGISTRATION FORM
July 14-16, 2023 • Hotel Ballast • Wilmington, NC
NCVMA Summer Veterinary Conference

Name: _____ DVM VMD Other _____

Practice Name: _____

Street Address: _____

City/State/Zip: _____

Telephone #: _____ Email: _____

(Required to receive proceedings.)

Registration: (Includes 16 hours of CE, proceedings via email, continental breakfasts, breaks, lunches and both evening receptions.) **YOU MUST request tickets below for Friday Lunch, Friday Evening Reception, Saturday Lunch and Saturday Evening Reception.** Family is invited to Friday Evening Reception. Tickets must be purchased for family attending Saturday Evening Reception with registered veterinarian/registered guest.

Registering by June 30/July 1-July 7/On-site

- | | | |
|---|--------------------------|----------|
| [] Veterinarian (State VMA Member - State _____) | \$395/\$455/\$515 | \$ _____ |
| [] Veterinarian (Nonmember) (JOIN NCVMA now and save \$20!!) | \$600/\$660/\$720 | \$ _____ |
| [] Veterinarian - 2020, 2021, 2022 Graduates | \$235/\$260/\$285 | \$ _____ |
| [] Veterinarian - NCVMA Life Member | \$235/\$260/\$285 | \$ _____ |
| [] Veterinarian 2023 Graduate | No Charge, Complimentary | |
| [] Technician/Staff | \$235/\$260/\$285 | \$ _____ |
| [] Veterinary Student/Technician Student (School _____) | No Charge, Complimentary | |

Veterinarian One-Day Registration (Select from options below)

- | | | | |
|---|-------------------------|-------------------|----------|
| [] Member (Fri/Sat) \$310/\$370/\$430 | [] Member (Sat/Sun) | \$235/\$295/\$355 | \$ _____ |
| [] Nonmember (Fri/Sat) \$425/\$485/\$545 | [] Nonmember (Sat/Sun) | \$310/\$370/\$430 | \$ _____ |

Spouse/Guest Registration: (Includes continental breakfasts, lunches, breaks, entrance to exhibit hall, and both Friday & Saturday Evening Celebrations.)

Name _____ \$105/\$125/\$145 \$ _____

Special Events: (Use this section to purchase social event tickets.)

- | | |
|---|--------------------------|
| [] Friday Lunch (Ticket required) Vegetarian <input type="checkbox"/> | No Charge, Complimentary |
| [] Friday Evening Welcome Reception # _____ (of people attending) | No Charge, Complimentary |
| [] Saturday Lunch (Ticket required) Vegetarian <input type="checkbox"/> | No Charge, Complimentary |
| Saturday Evening Awards/Installation Celebration (Tickets required) | |
| [] Registered Veterinarian and Registered Guests # _____ (of people attending) | No Charge, Complimentary |
| [] Non Registered Guests @ \$15 each # _____ | \$ _____ |
| Total | \$ _____ |

NOTE - Please list any special needs (dietary or otherwise): _____

Make check payable to NCVMA Summer Conference and mail to: 1611 Jones Franklin Road, #108, Raleigh, NC 27606 or charge to: VISA MasterCard Discover AMEX

Card #: _____ Exp. Date: _____

Name on Card: _____ CVV Security Code: _____

Credit Card Billing Address: _____

*Call the NCVMA office or join online at www.ncvma.org.

Register online at www.ncvma.org or fax form to (919) 851-5859.
Questions? Call NCVMA at (919) 851-5850.