CACVT Focus Conference Registration

January 28, 2012
Dermatology by Dr. Helen Power

Please return form with payment to CACVT, 191 Yuma Street, Denver, CO 80223.
Contact the office with **questions or assistance**: 303-318-0652 or info@cacvt.com.

Please Print (one person per form)**:**

Name: _____

Address: _____

_____

Contact phone: _____

E-mail: _____

Please check one:	Rcvd by Jan. 9	After Jan. 9 or on-site
CACVT member	□ $60	□ $70
Non-Member	□ $80	□ $90
Student*	□ $30	□ $35

*currently attending an AVMA-accredited program in veterinary technology.

Proceedings: Number of printed proceedings = _____ @ $5 each.
(Note: **Electronic copies** are included in registration fee and will be available for download approx. 2 weeks prior to the conference. You may purchase proceedings up to approx. 1 week prior to the conference. There will be a limited number available at the door with the cost being $10.)

Registration Total:
Registration total: $_____ Proceedings total: $_____ Total amount: $_____

Payment:
□ Check/MO enclosed, made payable to CACVT
(Contact office for return check policy.)

□ Credit Card (Please have the address listed as the mailing address for this card.) This is posted thru PayPal - a receipt will be sent to you via email.

Name as it appears on card: _____

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Expiration date (MM/YY): _____

3 or 4 digit security ID# on back: _____

□ Please send a PayPal invoice to me at the e-mail address I listed.

□ PayPal (the payment has already been submitted)
Name on credit card: _____

A confirmation and map will be sent to you. Any credit card information will be destroyed after posting.

Thank you for attending!