



Supporting Quality
Veterinary Care

Colorado Association of Certified Veterinary Technicians Student Membership Application

July 1, 2011 – June 30, 2012

Please fill out one application per person

*mandatory fields to fill out

1) Mailing information:

First Name*: _____ Middle Initial: _____ Last Name*: _____

Preferred first name if different from above: _____ Former last name (if applicable): _____

Mailing Address (Street, Apt #): _____

City: _____ State: _____ Zip: _____

2) Please fill out completely:

Male/Female: _____ Clinic / Employment (optional): _____

Home #: _____ Work #: _____ Cell #: _____

Which contact method do you prefer (check one)? Home / Work / Cell / e-mail

E-mail*: _____

By providing my e-mail, I authorize CACVT to e-mail me any pertinent information (like timely updates on events that affect me). I understand that CACVT will never give out my e-mail address to any other entity. You may always opt out any time.

As a student member, you will receive all your correspondence via email. Please let the office know if you email address changes. Thank you.

AVMA Technician School*: _____

Individuals must be currently attending an AVMA-accredited veterinary technology program to qualify

Expected Graduation Date* (mm/dd/yy): _____

3) Payment

- \$ 0.00** Student Association Member – attending Bel-Rea, CMC, or FRCC
 \$10.00 Student Association Member

**Return completed application and payment to:
CACVT, 191 Yuma Street, Denver, CO 80223**

Fax: 303-318-0651

If you have any questions, please contact the office at 303- 318-0652 (toll free 1-866-318-0652)

info@cacvt.com or admin@cacvt.com

If you wish to pay by credit card (through PayPal), please visit www.cacvt.com/apply or contact the office for assistance.

- Check enclosed (payable to CACVT)
 Paypal – please charge the credit card
 Paypal – already paid online
Name on card = _____

Full name on card:

Billing address:

Card #:

Expiration date:

3 or 4 digit security ID:

A membership kit will be mailed to you in approximately 4-6 weeks. If any of this information changes (e.g., new address, name change), it is the responsibility of the applicant to contact the CACVT office. CACVT is not responsible for mail not being delivered or improper recording of CE hours due to a name change not being reported.

Association dues may be deductible as professional or business expenses, to the extent allowable by law (please consult a tax accountant). Dues and other contributions to local, state, or national association are not deductible as charitable contributions for federal income purposes.

Thank you for your support!