



# ALASKA VETERINARY MEDICAL ASSOCIATION

## 2021 Membership Application/Renewal Form

Phone: 907-205-4272 Fax: 701-751-4451 Email: [execdir@akvma.org](mailto:execdir@akvma.org)

Are you a NEW MEMBER  (check here) or are you a RENEWING MEMBER  (check here)

NAME: \_\_\_\_\_

CREDENTIALS: \_\_\_\_\_

CLINIC/WORK SITE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ FAX NO.: \_\_\_\_\_

EMAIL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

PRACTICE TYPE: Check all that apply - SA  / EX  / EQ  / FA  / Other

Special Interests: \_\_\_\_\_

Preferred Mailing Address: Work  Home

List preferred Email address for AKVMA communications: \_\_\_\_\_

<input type="checkbox"/> I would like to be on the AKVMA Relief Veterinarian List.
Area: _____
Specialty: _____
Contact Phone: _____
Contact Email: _____

<b>CLINICAL VETERINARIAN</b>	
BEFORE or ON June 15, 2021	<input type="checkbox"/> \$205.00
Postmarked After June 15, 2021	<input type="checkbox"/> \$225.00
<b>INACTIVE VETERINARIAN (not engaged in veterinary related employment)</b>	
BEFORE or ON June 15, 2021	<input type="checkbox"/> \$103.00
Postmarked After June 15, 2021	<input type="checkbox"/> \$113.00
<b>2020 GRADUATES - 1<sup>ST</sup> YEAR IS COMPLIMENTARY</b>	<input type="checkbox"/> \$0.00
<b>I am a current UAF Veterinary Student</b>	<input type="checkbox"/> \$0.00
<b>NON-CLINICAL VETERINARIAN (MILITARY, GOV'T EMPLOYEES)</b>	
BEFORE or ON June 15, 2021	<input type="checkbox"/> \$164.00
Postmarked After June 15, 2021	<input type="checkbox"/> \$180.00
<b>YES! I would like to help sponsor UAF veterinary students for the next AKVMA Annual Meeting.</b> (all funds collected will be used to sponsor UAF students to attend the 2021 AKVMA Annual symposium.)	
Sponsorship Amount: \$ _____	

### Pay by Check (payable to AKVMA) or Credit Card.

Credit card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Full Billing Address: \_\_\_\_\_

Email to Send Receipt: \_\_\_\_\_ Payment Amount Authorized: \$ \_\_\_\_\_

**Note: Your credit card statement will show a charge processed through SQUARE processing within 1 – 3 days. A receipt will be emailed to you.**

**Please return form with payment to:** AKVMA or Fax to: 701.751.4451  
PO Box 1231  
Bismarck ND 58502-1231

*Membership fees paid to the Alaska State Veterinary Medical Association are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities. AKVMA estimates the non-deductible portion of your 2021 AKVMA dues (the portion which is allocable to lobbying) is 5%. The Omnibus Budget Reconciliation Act of 1993 eliminated the deductibility of non-profit organization dues spent on lobbying.*