



# 2019 AzVMA Membership Application

Please complete this application and mail it with a check or credit card information, along with a copy of your current state veterinary license (required to process and activate your membership) and optional headshot for our membership directory to AzVMA, 100 W Coolidge St, Phoenix, AZ 85013; phone 602-242-7936, fax 602-249-3828; [www.azvma.org](http://www.azvma.org).  
Membership questions: [membership@azvma.org](mailto:membership@azvma.org)

## Personal Information

Male  Female

Full Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Home Address \_\_\_\_\_

Home City \_\_\_\_\_ Home State \_\_\_\_\_ Home Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Home County \_\_\_\_\_

## Professional Information

Business Name \_\_\_\_\_

Business Website \_\_\_\_\_

Business Address \_\_\_\_\_

Business City \_\_\_\_\_ Business State \_\_\_\_\_ Business Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Business County \_\_\_\_\_

Degree (ex. DVM CSU 11) \_\_\_\_\_ Diplomate \_\_\_\_\_

Certifications \_\_\_\_\_

Practice Type (ex. Small Animal, Mixed, Equine) \_\_\_\_\_

Interest Areas (ex. Allergies, Reproduction, Wildlife)  
\_\_\_\_\_

Mobile Service:  Yes  No Relief Veterinarian:  Yes  No

Services Offered:  Dog Licenses  Microchipping  Boarding  Grooming

Permission to Fax/Email AzVMA CE or Other Information:  Yes  No

USDA Accreditation:  CAT I (small animals , no birds)  CAT II (all animals)

Mail To:  Home  Business

Address to appear in annual directory:  Home  Business

Do Not Include in Annual Directory (you may include or exclude any information, or choose not to be listed):

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Directory Format You Would Like to Receive:  Book  USB

*A portion of dues payments to the AzVMA may be deductible on federal income tax returns as business expenses, but they are not deductible as charitable contributions*

**Membership**

- Active Member \$324 (annual dues of \$294, plus one-time fee of \$30)
- New Graduate/Newly Licensed \$30 (for first year dues)
- Non-Resident \$144 (annual dues of \$114, plus one-time fee of \$30)
- Retired\* \$134 (annual dues of \$104, plus one-time fee of \$30)

*\*Veterinarian who has been a member of this or other state or national association now retired and living in AZ*

*Signature constitutes acceptance of and intention to be bound by the Articles of Incorporation, Constitution, and Bylaws of this Association and the Principles of Veterinary Medical Ethics of the American Veterinary Medical Association together with all amendments, present and future, of such Articles, Constitution, Bylaws, or Principles of Veterinary Medical Ethics which may be duly adopted pursuant to the provisions thereof, and to continuously strive for the advancement of the profession. I am aware that my application must be accompanied by a copy of my current state veterinary license or acceptable alternative and approved by the Board of Directors. If there are changes to my contact information, I understand it is my responsibility to update my member profile online or notify the AzVMA office in writing immediately. Questions should be sent to [membership@azvma.org](mailto:membership@azvma.org) or call the AzVMA office at 602-242-7936.*

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***Signature***

**Payment Information**

Check Enclosed  Amount \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to: AzVMA, 100 W. Coolidge St., Phoenix, AZ 85013 or fax: 602-249-3828  
or email: [membership@azvma.org](mailto:membership@azvma.org)

AzVMA policy prohibits the disclosure or distribution of its members' emails or their personal information for any purpose.