



How to Submit Online Payment for Membership Dues

Step 1: You will receive an email notification.

Arizona Veterinary Medical Association - Membership Dues Invoice/Receipt

 office@azvma.org
to me ▾

Arizona Veterinary Medical Association

Dear Test,

A link to view your membership dues invoice/receipt is provided below:

http://azvma.site-ym.com/members/invoice_view.asp?id=133896C0-3791-4869-A306-4D23B3268042

To pay your membership dues online, login to your membership account at www.azvma.org.

Thank you!

Arizona Veterinary Medical Association

This is an automated email sent from Arizona Veterinary Medical Association. Please do not reply to this email. It has been sent from an email account that is not monitored. If you feel you have received this message in error, please feel free to [contact us](#).

Click the link provided to access your membership dues invoice. It will open in a new webpage.



Step 2: If preferred, you may print to fax or mail payment.

← → C azvma.site-ym.com/members/invoice_view.asp?id=133896C0-3791-4869-A306-4D23B321

PRINT

Click print to submit invoice & payment via
fax: 602-249-3828
mail: Arizona Veterinary Medical Association
 100 W. Coolidge St.
 Phoenix, AZ 85013



100 W. Coolidge St., Phoenix, AZ 85013
 Ph: 602-242-7936 Fx: 602-249-3828
 Email: office@azvma.org
 Website: www.azvma.org

INVOICE

Please notify us if this person is no longer at this address.

Invoice # _____ Invoice Description: Membership Dues
 Invoice Date: _____
 Dr. Test Account _____ Membership Expiration Date: _____
 Arizona Veterinary Medical Association
 100 W. Coolidge Street
 Phoenix, AZ 85013
 United States

Description	Amount
2015-2016 Active Member Dues	\$294.00
Total	\$294.00
Balance Due	\$294.00

Note: \$29.76 of your dues is not deductible as a business expense.

My email is: _____ My fax number is: _____

____ I give AzVMA permission to fax and email me information about upcoming programs and other association activities.

Visa/MC/Discover #: _____ Exp. Date: _____

V-code: _____ Credit card billing zip code: _____ Amount: \$ _____

Credit card holder's name: _____ Signature: _____

Step 3: To submit online payment visit azvma.org.

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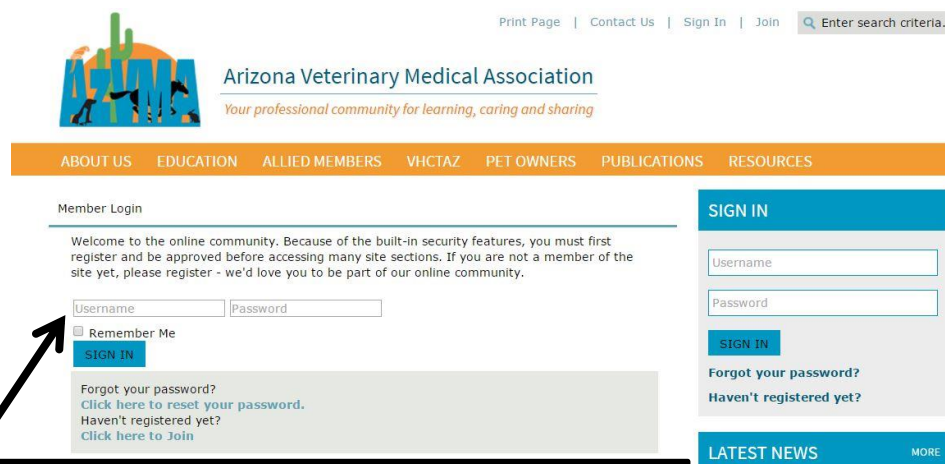
Arizona Veterinary Medical Association

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Click "link" located in email to be directed to www.azvma.org.



Click "Sign In" located at top right corner.



Enter your "username" and "password". Click "SIGN IN" button.

Step 4: Access your online membership dues invoice and submit payment.



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Membership Information

Test Account

2015-2016 Active Member Dues

Your current membership has expired. It expired on 6/1/2016.

Please note: It appears you have a transaction that is still open (see below.) Your current membership and expiration may change once this transaction has been processed and closed by administration.

Options	Status	Transaction Date	Processed	Type	Membership	Amount	Balance
 	Open	17 minutes ago	N/A	Bill Me	2015-2016 Active Member Dues	\$294.00	\$294.00

Click this logo to submit secure, online payment. Then enter your payment information.



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Your professional community for learning, caring and sharing

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 [View Invoice/Receipt](#)

Invoice Information

Invoice Number	300003063	Member Name	Test Account
Invoice Date	6/6/2016 5:08:43 PM	Invoice Amount	\$294.00

Balance



Payment Information

Payment Amount * (Example: 50.23)

Payment Type

Name on Card *
FIRST / M.I. LAST

Card Type *

Card Number *

Card CVV Number * (What is this?)

Exp. Date * / (mm/yyyy)

E-mail Address *
PAYMENT RECEIPT WILL BE SENT TO THE ADDRESS YOU SPECIFY

Billing Information

Organization

Address *

City/Town *