



The American College of Veterinary Pathologists™

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ACVP 2019/2020 Membership Renewal

First Name: _____ Last Name: _____ Suffix: _____

Nickname/Screen Name: _____

Personal Information:

Street Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Mobile: _____ Email: _____

Professional Information:

Organization: _____

Street Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Email: _____

What is your preferred address for print materials? Personal Professional

Additional Information:

Employment Type: Academia Retired
 Federal Government State Government
 Industry Uniform Services
 Private Diagnostic Lab Other: _____
 Private Practice

Journal Preference: Electronic Hard Copy

May ACVP send you email updates? Yes, I would like to OPT IN

May ACVP send you updates, such as conference abstract submission opening and closing dates; Award and Officer nominations; election results; and Annual Meeting information (hotels, registration, program/schedule updates, etc.)? NOTE: If you do NOT check the box above, you will receive NO group electronic correspondence from ACVP.

Fee Rates:

Member \$450

Reduced Rate Member \$150

Available to those individuals who have passed the certificate exam, but remain graduate students, postdoctoral fellows, & continued residency trainees. An email verification to info@acvp.org from the department chair is required to receive this membership rate.

Emeritus \$0 Emeritus with Hard Copy of the Journal \$83

NOTE: The ACVP membership year will change from a calendar year to July 1-June 30 effective in 2019. As a result, 2019 dues will encompass costs for 18 months, 1/1/19-6/30/20 before returning to a twelve month cycle (7/1/20-6/30/21). If you have specific questions, please contact the ACVP Office at +1-608-443-2466, ext. 144.

Payment: Check # _____ Credit Card (American Express, Discover, Mastercard, and VISA are accepted)

Name on Card: _____ Card Number: _____

Exp. Date: _____ CVV Code: _____ Cardholder's Signature: _____