



2010 WVPMA MEMBERSHIP DUES APPLICATION

Please renew your 2010 WVPMA membership by January 1, 2010

There will be an additional \$10.00 fee for dues received after January 1, 2010

Name: _____ New membership Renewal membership

Practice: _____ Position: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email/Website: _____

How long have you been in your position? _____ Software Used in Practice: _____

Please answer the following questions: Are you a full time practice manager or part time? (circle one) If you are a part time manager, are your duties split between technical or clerical? _____

Type of practice: Small Animal & Exotics Large Animal/Equine Mixed
 Specialty/Emergency

Do your duties include: Human resources Financial Statements Payroll
 Inventory Management Equipment Purchasing Marketing/PR

ANNUAL MEMBERSHIP (please check one):

Active Member* \$75.00 per year

An Active Member is defined as veterinary practice management personnel who have direct responsibility for the management and day-to-day operation of one or more veterinary hospitals.

*If applying for Active Membership, please have your employer sign the certification statement below.

Associate Member \$100.00 per year

An Associate Member is an individual whose job does not fit the criteria outlined for an Active Member but who does work in a related field of veterinary medicine.

Out-of-State Member \$125.00 per year

CERTIFICATION STATEMENT (must be completed for Active Member applicants)

I certify that this applicant is directly responsible for the management and day-to-day operations of the veterinary practice listed above. I also certify that the applicant's summary of his/her responsibilities is accurate.

Signature of applicant's employer

Please print name

Please print title or position

PAYMENT OF DUES

Each meeting is an additional \$20.00. If you would like to prepay for your meetings (at \$20.00 each) you will get one meeting free. We have five meetings each year, not including October convention, so you will pay for four meetings if you prepay.

Enclosed is a check in the amount of \$75.00 / \$100.00. This is for my annual WVPMA membership only. I will pay for meetings as I attend them.

Enclosed is a check in the amount of \$155.00 / \$180.00. This is for my annual WVPMA membership and prepayment for the meetings.

Half-year memberships apply to individuals applying after July 1st. Half year fees for an Active Member is \$50.00, \$75.00 for an Associate Member, and \$100.00 for an Out of State Member

Make check payable to: Wisconsin Veterinary Practice Managers Association (WVPMA)
Send to: John Rasmussen, WVPMA Membership Chair. 3518 Monroe Street. Madison, WI 53711.