

REGISTRATION FORM

DVMA WINTER CE MEETING

Wednesday, November 12, 2008
Registration: 8:00 a.m. to 9:00 a.m.
Meeting: 9:00 a.m. to 5:00 p.m.

Modern Maturity Center
1121 Forrest Avenue
Dover, Delaware

Direct Meeting Inquiries to:
Lynn M. Appel, Executive Director
Delaware Veterinary Medical Association
937 Monroe Terrace
Dover, DE 19904

Phone: 302-242-7014* * Fax: 302-674-8581 * E-mail: pelyemje@verizon.net

Clip and Mail or Fax

REGISTRATION DEADLINE: November 3, 2008

Check all that apply:

- DVMA Member (active, honorary or honor roll)
 Non-member
 I will attend lunch
 I prefer a vegetarian lunch (not available unless selected)
 I will not attend lunch
 I will NOT attend the meeting

Meeting Fees:

\$ 40.00
\$150.00

Total \$_____

Payment:

Check Enclosed Credit Card MasterCard VISA Discover
Acct. # _____ Cardholder*s Name _____
Exp. _____ Billing Address _____
Signature _____ City, State, Zip _____

Please print clearly:

Name Telephone Number

E-mail Fax Number
Clinic Name _____
Mailing Address _____
