Michigan Association of Veterinary Technicians <u>Membership Application</u>

Online membership registration is available! Please visit the Memberships page at www.mavt.us!

For membership by mail, please complete the form below and mail to: 245 S. Main St. PO Box #6
Eaton Rapids, MI 48827

This application valid through December 31 of each calendar year

tep 1: Applicant's N	lame			
□ New meml	pership	☐ Renewal		
ep 2: Active (LV	T); fee: \$30.00	OR	☐ Hospital (1-5 LVT's \$30/L	VT; > 5 LVT's \$25/LVT)
LVT	, Year of Graduati	on:	Institution/school:	
<u>Micl</u>	nigan VT License	# <u>690200 -</u>		
☐ Associate ((VT student); fee:	\$10.00		
	-			
□ Non-Licen Othe	sed Veterinary Pre er (Non-LVT Emp	ofessional; fee: \$ loyee or Student	25.00 :	
tep 3: Home Addres	ss:			
(city)	<u> </u>		(state)	(zip)
Business Nan	ne:			
Business Stre	et Address:			
	(city)		(state)	(zip)
Telephone:	(Primary)			<u>_</u>
-	(a	rea code)		
	(Work)			_
	(a	rea code)		
tep 4: E-mail Addre	ss:			
EM	AIL ADDRESS MU	JST BE PROVIDE	D TO ENSURE DELIVERY OF O	CORRESPONDENCE
tep 5: Preferred place	to receive MAVT re	elevant mailings:	□ Home □ Business	
Yes, I would	d like to receive pro	motional mailings	from veterinary vendors who supp	ort the MAVT.
tep 6: Employment	Type: n animal practice	☐ Research		

☐ Large animal practice	☐ Teaching
☐ Mixed animal practice	□ Other
Step 7: Amount enclosed: \$	(Make checks payable to MAVT)

*There will be a \$20 fee for checks returned due to non -sufficient funds.