

# VETERINARY STAFF REGISTRATION (Non-Technician)

One registrant per form. Please print legibly.

Washington State Veterinary Medical Association *presents:*

## 2024 PACIFIC NORTHWEST VETERINARY CONFERENCE

SEPTEMBER 27-29 • TACOMA, WA

REGISTRATION PACKETS WILL BE MAILED TO YOU IN ADVANCE OF THE MEETING.

Full Name	Nickname on Badge	
Pronouns (if desired)	Cell Phone	
Address 1 (business name if applicable)	<input type="checkbox"/> Work <input type="checkbox"/> Home	
Address 2		
City	State	Zip
Email (required - must be unique per attendee)		
Emergency Contact Name	Emergency Contact Phone	
<input type="checkbox"/> Yes, I agree to receive text messages		

### Multi-Day Conference Pass

Note: Members are veterinary staff (Non-Technicians) with 2024 dues paid to the WSVMA or another state VMA.

#### Pass + WSVMA Membership (Non-Technicians)

- |   | thru 8/9/24                    | After 8/9/24 or Onsite         |
|---|--------------------------------|--------------------------------|
| 3-Day Pass + WSVMA Staff Membership (Fri., Sat., Sun) | <input type="checkbox"/> \$385 | <input type="checkbox"/> \$435 |
| 2-Day Pass + WSVMA Staff Membership (Sat., Sun)       | <input type="checkbox"/> \$285 | <input type="checkbox"/> \$335 |

#### WSVMA Member (Non-Technicians)

- |                                    |                                |                                |
|------------------------------------|--------------------------------|--------------------------------|
| 3-Day Non-Member (Fri., Sat., Sun) | <input type="checkbox"/> \$295 | <input type="checkbox"/> \$345 |
| 2-Day Non-Member (Sat., Sun)       | <input type="checkbox"/> \$195 | <input type="checkbox"/> \$245 |

#### Non-VMA Member (Non-Technicians)

- |                                    |                                |                                |
|------------------------------------|--------------------------------|--------------------------------|
| 3-Day Non-Member (Fri., Sat., Sun) | <input type="checkbox"/> \$355 | <input type="checkbox"/> \$405 |
| 2-Day Non-Member (Sat., Sun)       | <input type="checkbox"/> \$245 | <input type="checkbox"/> \$345 |

### Single Day Pass

Select only **one day**. For more than one day please select a Multi-Day Conference Pass above.

#### WSVMA Member (Non-Technicians)

- |                             | thru 8/9/24                    | After 8/9/24 or Onsite         |
|-----------------------------|--------------------------------|--------------------------------|
| Friday, September 27 only   | <input type="checkbox"/> \$150 | <input type="checkbox"/> \$200 |
| Saturday, September 28 only | <input type="checkbox"/> \$150 | <input type="checkbox"/> \$200 |
| Sunday, September 29 only   | <input type="checkbox"/> \$95  | <input type="checkbox"/> \$115 |

#### Non-VMA Member (Non-Technicians)

- |                             |                                |                                |
|-----------------------------|--------------------------------|--------------------------------|
| Friday, September 27 only   | <input type="checkbox"/> \$195 | <input type="checkbox"/> \$245 |
| Saturday, September 28 only | <input type="checkbox"/> \$195 | <input type="checkbox"/> \$245 |
| Sunday, September 29 only   | <input type="checkbox"/> \$135 | <input type="checkbox"/> \$185 |

Easy Online registration  
available at [pnwvc.org](https://pnwvc.org)

Registration Subtotal

\$ \_\_\_\_\_

**Which tracks do you plan on attending? – (for informational purposes only)**

Small Animal    Large Animal    Equine    Other    Practice Management

**Meals & Events – (required)**

**MEALS ARE INCLUDED WITH REGISTRATION BUT YOU MUST IDENTIFY WHICH DAYS YOU WILL ATTEND. NO EXTRA MEALS WILL BE AVAILABLE ON-SITE.**

**Friday, 9/27 - Box Lunch**

Regular/Gluten Free  
 Vegetarian/Vegan

*Tomatoes are on most meals*

**Saturday, 9/28 - Plated Awards Lunch**

Regular    Gluten Free  
 Vegetarian    Vegan

**Friday, 9/27 - Special Event**

DJ Mixer Event *(RSVP Required)*  
*Enter your song request for the DJ!*

**Fun Run/Walk/Bike & Yoga**

Saturday, 9/28 - Fun Run / Walk / Bike  
 Saturday, 9/28 - Morning Yoga

No. of participants \_\_\_\_\_ x \$25 ea.  
No. of participants \_\_\_\_\_ x FREE

*Proceeds benefit the WSVMA Past Presidents' Scholarship Fund*

**Guest Registration & Meals**

Spouses and children over 6 years old. **Guest Registration includes lunches for guest(s) but you must identify which days guests will attend. NOTE:** Guest registration is not intended for veterinarians, technicians or veterinary staff (even if CE credit is not desired). Guest registration is needed by those attending sessions, meals or entering the exhibit hall during the conference.

Number of Guest: \_\_\_\_\_ x \$150 ea.

**Guest Subtotal**     \$ \_\_\_\_\_

Guest Name(s): 1.) \_\_\_\_\_

2.) \_\_\_\_\_

**Friday, 9/27 - Box Lunch**

Regular/Gluten Free  
 Vegetarian/Vegan

*Tomatoes are on most meals*

**Saturday, 9/28 - Plated Awards Lunch**

Regular    Gluten Free  
 Vegetarian    Vegan

**Friday, 9/27 - Special Event**

DJ Mixer Event *(RSVP Required)*  
*Enter your song request for the DJ!*

**Sponsor a Student**

With veterinary student attendance expected to increase this year, the WSVMA needs your support in helping out your future colleagues. Help the WSVMA and the students cover the cost by sponsoring them.

**Suggested Donation**    \$50

**Other Amount**    \$ \_\_\_\_\_

**Sponsorship Subtotal**     \$ \_\_\_\_\_

**Payment Information**

I have read and agree to follow the terms and conditions in the 2024 Pacific Northwest Veterinary Conference (PNWVC) Liability Waiver and Participation Agreement found at [pnwvc.org/waiver](http://pnwvc.org/waiver). I understand my consent to follow this agreement is mandatory for participation in the event.

**Please Print Legibly**

**Total Payment**     \$ \_\_\_\_\_

**Check:** Make payable to WSVMA (US Funds Only)

**Credit Card:**    MasterCard    VISA    AMEX

Name on card \_\_\_\_\_

CVV \_\_\_\_\_

Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_

Billing address (if different) \_\_\_\_\_

Email receipt to: \_\_\_\_\_

Signature \_\_\_\_\_

**TO SUBMIT YOUR REGISTRATION:**

**Email:** [info@wsvma.org](mailto:info@wsvma.org)  
**Fax:** (425) 396-3192  
**Phone:** (425) 396-3191

**Mail:** WSVMA  
23515 NE Novelty Hill Rd.,  
Ste. B221-337  
Redmond, WA 98053

**STAFF**  
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