

VETERINARIAN REGISTRATION

One registrant per form. Please print legibly.

Washington State Veterinary Medical Association *presents:*

2025 PACIFIC NORTHWEST VETERINARY CONFERENCE

SEPTEMBER 26-28 • TACOMA, WA

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)	College/Year	
Emergency Contact Name	Emergency Contact Phone	
<input type="checkbox"/> Yes, I agree to receive text messages		

Complete Conference Pass – 9/26 - 9/28

Note: Members are those with current dues paid to the WSVMA or another state VMA.

Veterinarian	thru 8/10/25	After 8/10/25 or Onsite
WSVMA Member	<input type="checkbox"/> \$475	<input type="checkbox"/> \$550
Complete Conference Pass + WSVMA General Membership (save \$30)	<input type="checkbox"/> \$780	<input type="checkbox"/> \$860
Non-VMA Member	<input type="checkbox"/> \$700	<input type="checkbox"/> \$775
Retired VMA Member	<input type="checkbox"/> \$375	<input type="checkbox"/> \$450
2021-2025 Graduates	<input type="checkbox"/> \$320	<input type="checkbox"/> \$395
Veterinary Students	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary

Single Day Pass

Select only **one day**. For more than one day please select a Complete Conference Pass above.

WSVMA Member	thru 8/10/25	After 8/10/25 or Onsite
Veterinarian - Friday, September 26 only	<input type="checkbox"/> \$290	<input type="checkbox"/> \$340
Veterinarian - Saturday, September 27 only	<input type="checkbox"/> \$290	<input type="checkbox"/> \$340
Veterinarian - Sunday, September 28 only	<input type="checkbox"/> \$205	<input type="checkbox"/> \$255
Non-VMA Member		
Veterinarian - Friday, September 26 only	<input type="checkbox"/> \$445	<input type="checkbox"/> \$495
Veterinarian - Saturday, September 27 only	<input type="checkbox"/> \$445	<input type="checkbox"/> \$495
Veterinarian - Sunday, September 28 only	<input type="checkbox"/> \$290	<input type="checkbox"/> \$340

Wet / Dry Labs

Required: Purchase of Complete Conference Pass or purchase of Single Day Pass for day of lab. Limited space is available.

* Email info@wsvma.org to be added to the waitlist for sold out labs.

Friday, September 26	WSVMA Member	Non-VMA Member
*CPR Recover Lab includes Online Course Prerequisite (Limited to 20 Attendees)	<input type="checkbox"/> \$499	<input type="checkbox"/> \$599
Saturday, September 27		
*JumpStart Front Office Bootcamp (Limited to 40 Attendees)	<input type="checkbox"/> \$199	<input type="checkbox"/> \$249

Easy Online registration
available at 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, 9/26 - Box Lunch

- ☐ Yes, I will need a meal
☐ No, I will not be attending

We will contact you for your specific meal choice at a later date.

Saturday, 9/27 - Box Lunch

- ☐ Yes, I will need a meal
☐ No, I will not be attending

We will contact you for your specific meal choice at a later date.

Friday, 9/26 - Awards Ceremony

- ☐ 5:00-7:00 pm (RSVP Required)

Appetizers & No-Host Bar

Fun Run/Walk/Bike & Yoga

☐ Saturday, 9/27 - Fun Run / Walk / Bike

No. of participants _____ x \$25 ea.

☐ Saturday, 9/27 - Morning Yoga

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, 9/26 - Box Lunch

- ☐ Yes, I will need a meal
☐ No, I will not be attending

We will contact you for your specific meal choice at a later date.

Saturday, 9/27 - Box Lunch

- ☐ Yes, I will need a meal
☐ No, I will not be attending

We will contact you for your specific meal choice at a later date.

Friday, 9/26 - Awards Ceremony

- ☐ 5:00-7:00 pm (RSVP Required)

Appetizers & No-Host Bar

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 2025 Pacific Northwest Veterinary Conference (PNWVC) Liability Waiver and Participation Agreement found at 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

Fax: (425) 396-3192

Phone: (425) 396-3191

Mail: WSVMA

23515 NE Novelty Hill Rd.,
Ste. B221-337
Redmond, WA 98053

DVM

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