





| FEBRUARY 1-3, 2024 – EMBASSY SUITES, NOBLESVILLE, IN | | | | | |
|---|---------------|--------------------|----------------|----------|-----------|
| 2024 CROSSROADS VETERINARY CONFERENCE (CRVC) REGISTRATION FORM - SAVE \$50 IF YOU | | | | | |
| REGISTER BEFORE JANUARY 9, 2024 | | | | | |
| Name: | | Clinic Name: | | | T |
| Address: | | City: | | State: | Zip: |
| Cell Phone: | | Email: | | | |
| Please submit registration form via, email to lourdes@invma.org or mail to IVMA 125 West Market Street, Suite 300 Indianapolis, IN 46204. Online registration is also available at www.invma.org. Please read the cancellation policy on the back. By submitting a registration, you are agreeing to the cancellation policy! | | | | | |
| VETERINARIAN REGISTRATION | | | | | |
| \$420 Early Bird Rate - IVMA Member 3 Day Registration - After January 9, 2024, \$470 | | | | | |
| \$420 Early Bird Rate - Member of your State's VMA 3 Day Registration - After January 9, 2024, \$470 | | | | | |
| \$210 Early Bird Rate - Life / Sustaining Member 3 Day Registration - After January 9, 2024, \$260 | | | | | |
| \$210 Early Bird Rate - New Graduate & Recent Graduate Member 3 Day Registration - After January 9, 2024, \$260 | | | | | |
| \$680 Early Bird Rate - Non-Member 3 Day Registration - After January 9, 2024, \$730 | | | | | |
| \$245 Early Bird Rate - IVMA Member 1 Day Registration - After January 9, 2024, \$295 | | | | | |
| \$355 Early Bird Rate - Non-Member 1 Day Registration - After January 9, 2024, \$405 | | | | | |
| \$690 Early Bird Rate - Renew Your IVMA Membership Through June 30, 2025 — After January 9, 2024, \$740 | | | | | |
| \$690 Early Bird Rate - Join IVMA & Receive Membership Through June 30, 2025 - After January 9, 2024, \$740 | | | | | |
| If you are a 1 Day registrant, please indicate which day you will be attending: Thursday PM & Friday 🔲 Saturday 📖 | | | | | |
| □ REGISTERED VETERINARY TECHNICIAN – VETERINARY ASSISTANT REGISTRATION | | | | | |
| Registered Veterinary Technician | | ☐ Veterinary Assis | stant | | |
| \$235 - 3 Day Registration - After January 9, 2024, \$285 \$\square \$\square\$ 1 Day Registration - After January 9, 2024, \$175 | | | | | |
| Please indicate which day you will be attending the conference: Thursday PM & Friday Saturday Saturday | | | | | |
| GUEST REGISTRATION | | | | | |
| Guest Registration 3 Day Pass \$60 (Per Pass) Number of Guests: Total Cost: \$ | | | | | |
| Guest Name: | Guest Na | Name: | | | |
| EVENT TICKETS | | | | | |
| | Yes, I will a | ittend. No, | , I will not a | | 4, 7-9pm |
| Friday Boxed Lunch - Friday, February 2, 2024 (IN Yes, I would like a boxed lunch. No, I would not | : like a bo | xed lunch. | would like a | <u> </u> | n. |
| Saturday Boxed Lunch - Saturday, February 3, 202 Yes, I would like a boxed lunch. No, I would not | | | | | n. |
| PAYMENT INFORMATION | | | | | |
| Conference Registration: \$ + Guest Registration(s) \$ = \$ Total Amount Due | | | | | |
| Payment Information: Total Due: \$ Check# | | Credit Card # | | | |
| Credit Card: Master Card – Visa – American Express – Discover CVV# Expiration Date: | | | | | <u>::</u> |
| Name on Card: Same as above | | | | | |
| Billing Address: | City: | | | State: | Zip: |





IVMA Cancellation Policy

No refunds will be issued after the registration has been submitted to IVMA. If it is an extenuating situation, the registrant may submit a written request for a refund which will be considered by the Crossroads planning group no sooner than two weeks after the meeting is completed. If granted, the registrant would receive a refund of the original amount less than \$25. If a refund is requested is related to a weather/travel emergency, email notification must be submitted to IVMA. These requests will be reviewed by the IVMA Board of Directors and possible meeting refunds will be determined by them.

*Purchasing a registration signifies your agreement to these terms.