



## VALVT Membership & Renewal Form 2010

The VALVT is the professional organization of Licensed Veterinary Technicians in Virginia. PLEASE complete the following application and send to the address below with your check for \$35 made payable to VALVT, Inc. or pay using a credit card at [www.valvt.net](http://www.valvt.net). Online payment also requires submission of this form by mail to the address below. **Membership runs through Jan. 1- Dec 31, 2010. Renewals are accepted in December.**

### Membership Status:

New \_\_\_\_\_ (INCLUDES NEW GRADUATES WHO WERE PREVIOUSLY STUDENT MEMBERS)  
Renewal \_\_\_\_\_ **VA STATE LVT License REQUIRED#** \_\_\_\_\_

**Students:** Students currently enrolled in an AVMA-accredited Veterinary Technology Program receive complimentary membership. NO payment is required; please submit form to the address below.

School Attending \_\_\_\_\_ On Campus \_\_\_\_\_ Off Campus \_\_\_\_\_  
Expected Graduation year \_\_\_\_\_

**Please write / type clearly or you will not receive your benefits as a member!!**

CHECK BOX IF YOU DO NOT WANT YOUR PERSONAL INFORMATION IN THE VALVT DIRECTORY

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County (NOT COUNTRY): \_\_\_\_\_

Phone: Home (     ) \_\_\_\_\_ Work (     ) \_\_\_\_\_

Email Address: \_\_\_\_\_

(Email is faster, reduces costs and waste. Please provide an email and check for our website [www.valvt.net](http://www.valvt.net) for information pertaining to our profession on a regular basis)

Employer: \_\_\_\_\_

Technician College Attended: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

### COMMITTEES:

The Association utilizes committees to get our members more involved and to help decrease the workload of the Executive Board. We NEED your help and we will become stronger if you are involved. If you do not choose a committee, one can be appointed for you that meet close to your region. Active committee members receive discount on C.E. registration fees.

Awards: \_\_\_\_\_ Continuing Education: \_\_\_\_\_ Election: \_\_\_\_\_

Finance: \_\_\_\_\_ Liaison: \_\_\_\_\_ Membership: \_\_\_\_\_

Newsletter: \_\_\_\_\_ Professional Affairs: \_\_\_\_\_

**\*\*\*FOR OFFICE USE ONLY\*\*\***

Payment \_\_\_\_\_ Check# \_\_\_\_\_ Membership # \_\_\_\_\_

Region \_\_\_\_\_ Received \_\_\_\_\_ Sent \_\_\_\_\_

Please send completed form, along with check made payable to VALVT, INC. or money order to:

VALVT- Membership  
351 Wagon Shop Road  
Middlebrook, VA 24459  
[VALVT@hotmail.com](mailto:VALVT@hotmail.com)  
[www.VALVT.net](http://www.VALVT.net)