

MEMBERSHIP DUES 2023

Mail this form along with a cheque to:
Dr. Suzanne Chenard Albrecht, CCVA Treasurer
6538 Rideau Valley Drive N.
Manotick, ON
K4M 1B3
CHEQUES ARE MADE PAYABLE TO THE
CCVA

TYPE OF MEMBERSHIP AND FEES: ☐ **Individual Veterinary Member**- full (voting) membership Fee- \$50 **☐** Individual Associate Member Fee- \$50 Non-veterinarian, Industry Representative- Name_____ Veterinary technician- Name_____ Non-veterinarian, Staff of a veterinary teaching facility-Name-☐ Clinic Membership Fee- \$200 for all staff in one practice location and address For Clinic Memberships, names of Veterinarians, Technicians and Support Staff included in clinic membership: **MEMBER INFORMATION:** Clinic/Company Name: Address:____ Phone: Fax: Email: PRACTICE TYPE: Private ____Government ____Company Representative ____ Laboratory ____Other (Specify-_____) Most of the communication from CCVA will be by e mail and through the website www.centralcanadavetassociation.com Don't have an e-mail? - CCVA newsletters can be sent via mail if requested.

Mail my newsletter please \square