



Atlantic Provinces Veterinary Conference 2012

April 20–22 • Halifax Marriott Harbourfront Hotel, Halifax, NS

Pre-registration Form

Friday, April 20, 7:30 AM to Sunday, April 22, 3:00 PM



Avoid long registration day line-ups
Pre-register and proceed directly to badge reception!

Deadline for pre-registration is Thursday, April 5, 5:00 pm SHARP!

FEES	# of Days	Weekend (Pre-reg)	Weekend (Late-reg)	One Day			
Veterinarian	(3)	\$350.00	\$400.00	\$190.00	x	___	= _____
Vets over 65	(3)	\$175.00	\$205.00	\$90.00	x	___	= _____
Technician	(3)	\$175.00	\$205.00	\$90.00	x	___	= _____
Managers	(3)	\$275.00	\$325.00	\$150.00	x	___	= _____
Undergraduate	(3)	\$125.00	\$175.00	\$70.00	x	___	= _____
Support Staff	(2)	\$125.00	\$175.00	\$70.00	x	___	= _____

Limited lab registration - book early!

<u>Wet Lab - Technicians</u>	<u>With Full Registration</u>	<u>Alone</u>			
Hematology	\$125.00	\$175.00	x	___	= _____

All registered delegates will receive an electronic copy of the proceedings on a USB memory stick, as part of the registration. Those wishing to receive **printed proceedings** on-site must pre-order the specific category and number of copies as indicated.

<u>Proceedings: Printed format</u>					
Veterinarian		\$30	x	___	= _____
Technician		\$20	x	___	= _____
Managers / Support Staff		\$20	x	___	= _____
				Subtotal	_____
				Add 15% HST	
				TOTAL	<input type="text"/>

Complete identification and payment information

Practice/Hospital: _____

Address: _____

Tel: _____ Fax: _____

Email: _____

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Identification Information

Badge Names *(Print block letters)*

Indicate
beside names:

Doctor - **Dr.**
Technician - **T**
Manager - **M**
Support Staff - **S**
Undergraduate - **U**

_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

Check beside each delegate above who will be receiving printed proceedings (these must be pre-ordered).

If paying by
credit card,
registration may
be faxed to:
(902) 897-2589

Payment Information

Cheque or Money Order Visa Mastercard

Card # _____ Expiry _____

Cardholder's Name (please print) _____

Cardholder's Signature _____

Full payment must accompany the registration form. No post-dated cheques will be accepted. If paying by cheque, make payable to APVC. A full refund will be given for any medical or other emergency cancellations.

To Register

Submit completed form, payment and identification information to:

Atlantic Provinces Veterinary Conference
106 Maple Blvd.
Truro, NS
B2N 4N3

**How to
Contact Us**

For further information, contact:

Tel: (902) 899 2233
Email: eprowse@eastlink.ca
Website: www.apvc.ca