



# NEW GRADUATE MEMBERSHIP

## Monthly Dues Payment Enrollment Form

New Graduate Members are invited to take advantage of a new monthly dues payment option. Rather than pay the full \$120 annual fee up front, you may opt to have your credit card billed \$10 per month.

### What is New Graduate Membership?

New Graduate Membership is open to veterinarians who have graduated within the last two years. In the third year, members will renew at the regular Active Membership rate and receive a \$100 voucher for the Midwest Veterinary Conference.

### Terms of Monthly Dues Payments

- Your dues payment of \$10 per month will be automatically billed to your credit card on the first of each month.
- You will be billed monthly until you request the payments be discontinued.
- When New Graduate Membership converts to Active Membership on Jan. 1 in the third year following graduation, you may opt to continue monthly payments or switch to annual payments. Your monthly payment will be adjusted to reflect the Active Member rate (currently \$15 per month / \$180 annually).
- The monthly payment option may not be discontinued and restarted in any 24-month period unless the monthly payment has been converted to an annual payment within this period.
- The information you provide below will be entered into the OVMA's merchant processing provider's encrypted network and the hard copy destroyed.
- In the event your payment does not go through, OVMA will contact you for updated payment information. After two months of non-payment, your membership will expire.

☐ YES! I wish to pay my OVMA membership dues on a monthly basis. I understand that the credit card information I provide below will be charged \$10 per month until I request it to be discontinued.

## PAYMENT INFORMATION

Credit Card Type: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Cardholder Name \_\_\_\_\_ CVV \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Signature \_\_\_\_\_

Email Address\* \_\_\_\_\_ Phone \_\_\_\_\_

\*This is where we will send your payment receipts

## MEMBER DETAILS

*If you are a new member, please provide the following:*

Veterinary School Attended \_\_\_\_\_ Graduation Year \_\_\_\_\_

Area(s) of Practice

- |                                               |                                      |                                              |                                              |                                       |
|-----------------------------------------------|--------------------------------------|----------------------------------------------|----------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Academic/Teaching    | <input type="checkbox"/> Equine      | <input type="checkbox"/> Government/Military | <input type="checkbox"/> Pet Animal          | <input type="checkbox"/> Shelter      |
| <input type="checkbox"/> Corporate/Commercial | <input type="checkbox"/> Food Animal | <input type="checkbox"/> Mixed/General       | <input type="checkbox"/> Research/Laboratory | <input type="checkbox"/> Other: _____ |

Company/Organization \_\_\_\_\_

Mailing Address ☐ Use billing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

☐ Check here if you prefer to receive the OVMA newsletter by email. Otherwise, we will send it to the address provided above.

**SUBMIT FORM VIA:** Mail—OVMA, 1472 Manning Pkwy., Powell OH 43065 • Fax—614.436.1301