

TVMA Dues Payment and Personal Information Change

Last Name _____ First Name _____

If paying for multiple Veterinarians, please list their names: Dues are \$100/ veterinarian/ year.

Check Enclosed in the amount of _____ made payable to the TVMA and mail to:

Toledo Veterinary Medical Association
c/o Sue Savage
2850 N. Reynolds Rd
Toledo, Ohio 43615

Information New or Changed

You can also update your information by logging on to mytvma.org

NOTE: A current email address is very important as most notices about CE events and other TVMA sponsored events are sent via this route.

My email address is: _____

My place of employment is: _____

My employment Phone is: _____

My employment Address is: _____

My employment City _____ **State** _____ **ZIP** _____

My Mailing Information (used for mailing labels etc)

Mailing Address _____

Mailing City _____ **State** _____ **ZIP** _____