



# A.V.A.C.

*Association of Veterinary Acupuncturists of Canada*  
*Association des Veterinaires Acupuncteurs du Canada*

P.O. Box 32497, Vaudreuil-Dorion, QC Canada J7V 9V2

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## AVAC Membership Renewal / New Member Application Form July 1, 2018 – June 30, 2019

**\*\*Your AVAC membership renewal automatically includes IVAS membership renewal\*\***

AVAC \$90 + IVAS \$110 + \$30 surcharge/exchange rate (IVAS dues are paid in US funds) = \$230.00

Please check that your application includes:

- A copy of your current provincial or state veterinary licence
- A cheque/money order payable to AVAC for **\$230.00** (Canadian funds)
- The number of education hours granted by IVAS that you have received during July 2016 – June 2018 (for ACTIVE members) **AND COPIES OF CERTIFICATE OF ATTENDANCE**
- **BOTH** pages of application form filled out **CLEARLY**.
- **Send to A.V.A.C by June 27, 2018**

<u><b>INFORMATION</b></u>		<b>Fill this in if there are changes or corrections</b>	<b>Mailing Address Y or N</b>	<b>Include on AVAC website? Yes No</b>	
NAME					
ADDRESS (WORK)					
TELEPHONE (WORK)					
ADDRESS (HOME)					
TELEPHONE (HOME)					
CELLPHONE					
FAX					
EMAIL					
Membership Category	associate	IVAS Certification #	Ref. member : <b><u>305</u></b>		

**Registration Fee: \$230.00 CDN** for both Active and Associate members

**PAYMENT:** Cheque No: \_\_\_\_\_ or Certified Cheque No: \_\_\_\_\_ or Money Order No: \_\_\_\_\_

Make Cheque payable to A.V.A.C.

**CONTINUING EDUCATION HOURS:**

To maintain your Active/Certified membership you must complete 10 hours of IVAS recognized C.E. hours during the past 24 months (July 2016 – June 2018). **NEW FOR 2017: Please list below and also attach copy of Certificate of Attendance for EACH event. Copies may also be scanned and sent electronically to the AVAC office.**

Name of event/organization	Dates (DD/MM/YY)	City/Province or State/Country	CE Hours

I certify that I have attended the C.E. sessions as listed above.

I certify that I have a current valid licence to practice veterinary medicine and am a member in good standing in my province/state/country.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Active member = Veterinarian; meets IVAS certification requirements; acquired at least 10 hours of C.E. in the past 24 months.*

*Associate member = Veterinarian; has not completed all of IVAS certification requirements &/or has not acquired 10 hours of C.E. in the past 24 months.*