

## **Online Printed Registration Form**

## Dr. Wendy Blount's "Practical *Clinical Pathology*" Seminar December 3 & 4, 2022

Ellen Trout Education Center on Lufkin Zoo Property ~ Lufkin, TX

(Print from your computer. Then fill out by hand. Please print as dark and plain as possible.)

Attendee Name:	e-mail Address:
Mailing Address:	Billing Address:
City: State: Zip:	City: State: Zip:
Phone:	Other phone:
"Early Bird" Registration Fee thru Sunday, November 13, 2022	
\$350.00 "Early Bird" DVM Registration – both days	\$200.00 Standard DVM – One Day – Sat Sun
\$200.00 Standard Vet Tech Registration	n – only Tech Registration choice (covers one or both days)
"Standard" Registration Fee Mond	ay, November 14 <i>thru</i> Sunday, November 27, 2022
\$400.00 "Standard" DVM Registration – both days	\$225.00 "Standard" DVM – One Day – Sat Sun
\$225.00 "Standard" Vet Tech Registration – only Tech Registration choice (covers one or both days)	
"Final" Registration Fee Monday, November 28 thru Sunday, December 4, 2022	
\$450.00 "Final Week" DVM Registration – both days	\$250.00 Final Week DVM – One Day – Sat Sun
\$250.00 "Final Week" Vet Tech Registration – only Tech Registration choice (covers one or both days)	
Seminar Registration includes a Proceedings produced in the "Flash Drive" format.  Printed Proceedings are not available for this Seminar.	
Payment Options	
• <u>A check or money order made payable to "von Allmen Agency"</u> mailed with this form to: von Allmen Agency • 463 County Road 199 • Nacogdoches, TX 75965.	
• Payment by credit card by completing and faxing this form to (936) 568-9991. If paying with a credit card by fax, the billing address on the credit card must match the billing address at the top of this form.	
Register and pay for the seminar online using e-check, credit card, debit card or PayPal account, please visit <a href="http://www.practicalvetmed.com/clinpath-lufkin4/registration.php">http://www.practicalvetmed.com/clinpath-lufkin4/registration.php</a>	
Credit/Debit Card Method of Payment (please	circle): American Express Discover MasterCard VISA
Card Number:	Expiration Date: CVC Code:
Amount Approved: Payee Signatu	re: Date:

Note: You will receive a Confirmation E-mail with Map to the Seminar & Local Hotel Options

For more information: Phone: (936) 564-7792 • e-mail: <a href="mailto:seminars@vonallmen.net">seminars@vonallmen.net</a>