

REGISTRATION OPTIONS

FULL REGISTRATION

	BEFORE 2/6/2027	AFTER 2/6/2027
☐ Veterinarian - Member (TVMA, State VMA)	\$470	\$515
☐ Veterinarian - Non-Member*	\$620	\$665
☐ TVMA Life Member	\$150	\$200
☐ Technician TVMA Member	\$265	\$315
☐ Technician Non-Member	\$315	\$365
☐ Practice Staff	\$315	\$365
☐ Veterinary Student – TVMA Member	FREE	FREE
☐ Veterinary Student - Non-Member (Resident, Intern)	\$125	\$175
☐ Veterinary Technician / Pre-Vet Student	\$65	\$90
☐ Spouse/Guest Registration * _____	\$25	\$25

* One spouse/guest registration per attendee includes admission to exhibit hall, excluding meals. See Ticket section to purchase event tickets.

☐ Spouse/Guest Registration ** _____	\$100	\$100
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**Includes all conference breaks and lunches. Awards Banquet Tickets must be purchased separately. See Tickets section to purchase additional event tickets. Please indicate below which days guest plans to attend.

☐ Friday ☐ Saturday ☐ Sunday

ONE-DAY REGISTRATION ☐ Friday ☐ Saturday ☐ Sunday

☐ Veterinarian - Member (TVMA, State VMA)	\$310	\$360
☐ Veterinarian - Non-Member*	\$460	\$510
☐ TVMA Life Member	\$80	\$110
☐ Technician TVMA Member	\$170	\$220
☐ Technician Non-Member	\$220	\$270
☐ Practice Staff	\$220	\$270
☐ Veterinary Student – TVMA Member	FREE	FREE
☐ Veterinary Student - Non-Member (Resident, Intern)	\$100	\$150
☐ Veterinary Technician / Pre-Vet Student	\$40	\$40

TICKETS - (not included with registration fee)

Friday Grand Ole Opry - bus will leave from hotel at 5:30pm	☐ Ticket \$150	_____ # of Tickets
Saturday TVMA Awards Dinner & Business Meeting - 5 pm	☐ Ticket \$35	_____ # of Tickets

PROCEEDINGS

Proceedings will be provided to all attendees online through the TVMA website. Bound Proceedings Book may be pre-purchased for an additional cost.

☐ Order a Bound Proceedings Book	\$75 ea.	_____ # of Books
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TVMA MEMBER DISCOUNT

Join **TVMA Now** to take advantage of the MCVC registration discount for members. For assistance please contact the TVMA office at info@tvmanet.com or 931-438-0070.

PAYMENT INFORMATION

CONTACT INFORMATION

Name On Badge: _____

Credentials / Degree: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Emergency Contact Cell Phone #: _____

☐ I understand that by attending this event, I give TVMA

permission to share my email address with MCVC Exhibitors.

SPECIAL DIETARY REQUIREMENTS

Please indicate: ☐ Vegetarian ☐ Vegan

Food Allergies — please specify: _____

PAYMENT INFORMATION ☐ Check (Payable to TVMA)

☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Credit Card #: _____

Exp. _____ CVV: _____

Signature _____

SUBMIT FORM

by 2/06/27 for early discount — Pre-registration closes 2/16/27

1. ONLINE: mcvc.tvmanet.com
2. FAX: (931) 433-6289
3. MAIL: PO Box 803, Fayetteville, TN 37334

Questions? Call (931) 438-0070 ext 102