

3 WAYS TO REGISTER



BY EMAIL:
Email form to
registration@viticusgroup.org



BY FAX:
702.739.6420
For security reasons,
no telephone registrations
will be accepted.



BY MAIL:
Viticus Group
PO Box 50755
Henderson, NV 89016

PLEASE READ BEFORE COMPLETING FORM

- ▶ 2022 registration includes complimentary digital access to Conference Notes.
- ▶ Registration is nontransferable.
- ▶ Only one registration per form (photocopy as needed). Complete both sides of this form.
- ▶ All fields with * are required.
- ▶ To review Annual Conference Terms & Conditions, please visit our website at viticusgroup.org.

► PREFERRED PARTICIPANT INFORMATION Please Print (Minimum age for all registrants: 18)

Dr. Mr. Ms. Mrs. Gender Male Female *Birthday _____ (mm/yyyy)

*Name _____
Last First MI

License # _____ State _____

► PREFERRED CONTACT INFORMATION

*Primary Email _____

*Preferred Phone: Cell Business Cell _____ Business _____ Fax _____

Emergency Contact Name _____ Emergency Contact Phone _____

*Please select a preferred address: Home Business Business Name _____

Mailing Address _____ Apt/Ste _____

City _____ State/Prov _____ Zip/Postal Code _____ Country _____

Do not include me in Exhibitor mailings. Opt-in for mobile messaging

► PROFESSIONAL INFORMATION (A graduate Veterinarian must register as a Veterinarian.)

*Participant Type: Veterinarian Veterinary Technician Veterinary Assistant Practice Manager Administrative Staff General Attendee

Degree(s) _____

School Graduated _____ Year Graduated _____

*Classification: Academia Avian/Exotics (Exclusive) Equine (Exclusive) Food Animal (Exclusive) General Attendee Government

Industry Mixed Practice (Avian & Exotics/Small Animal) Mixed Practice (>50% Small Animal + Some Large Animal)

Mixed Practice (>50% Large Animal + Some Small Animal) Small Animal (Exclusive) Specialty Practice Not Applicable

Veterinary Specialty _____

How did you hear about us? Direct Mail Email Banner Ads Other Conferences Journals/Publications Social Media Past Attendee

► EMPLOYER INFORMATION Please fill out if you are a Veterinarian

Employer Type: Academia Corporate Private Practice-General Private Practice-Specialty Not Applicable

Practice Role: Owner Associate Intern/Resident Not Applicable

Number of Veterinarians in your practice? _____ Number of Technicians in your practice? _____

Number of practices in group? _____

Gross Annual Revenue in Practice/Group? <\$1M \$1M-\$3M \$3M-\$5M \$5M-\$10M \$10M+

Purchase Influence: Decision Maker Some Influence No Influence Recommendation Only

Please call 1-888-800-7326 or go to www.viticusgroup.org for current conference promotional codes

Participant's Last Name _____ First Name _____

► **FULL CONFERENCE**

| | Fee | Total Amount |
|---|-------|--------------|
| Veterinarian | \$760 | \$ _____ |
| Veterinarian - Retired (Age 65+) No CE Credit (Must show ID onsite and be 65+ years old) | \$215 | \$ _____ |
| Veterinarian - First-year graduate (Must have graduated within 12 months of the Conference) | \$215 | \$ _____ |
| Veterinary Technician/Veterinary Assistant/Administrative Staff/Practice Manager | \$500 | \$ _____ |
| General Attendee - No CE Credit | \$500 | \$ _____ |
| DVM/Veterinary Technician Students | \$25 | \$ _____ |
| Active Military Veterinary Professionals | \$0 | \$ _____ |
| Guest Registration - NO CE or access to scientific sessions | \$65 | \$ _____ |

Dr. Mr. Ms. Mrs. Guest Name _____

1-DAY CONFERENCE

| | Fee | Total Amount |
|--|-------|--------------|
| Veterinarian | \$425 | \$ _____ |
| Veterinary Technician/Veterinary Assistant/Administrative Staff/Practice Manager | \$275 | \$ _____ |
| General Attendee (No CE Credit) | \$275 | \$ _____ |

(Please indicate day attending) Monday Tuesday Wednesday Thursday

HANDS-ON LABS (PLEASE PRINT OUT HANDS-ON LAB WAIVER FORM)

Lab # _____ Fee \$ _____ Lab # _____ Fee \$ _____ Lab # _____ Fee \$ _____ \$ _____

WORKSHOPS

WS # _____ Fee \$ _____ WS # _____ Fee \$ _____ WS # _____ Fee \$ _____ \$ _____

DONATION

Give back to the veterinary profession. Donate to help fund continuing education. WVC dba Viticus Group is a 501(c)(3) non-profit organization incorporated in Nevada. Your donation may be tax deductible pursuant to the provisions of section 170(c) of the Internal Revenue Code of 1986. \$ _____

DISCOUNT CODE..... _____

TOTAL FEES DUE, NET OF DISCOUNT.....\$ _____

► **PAYMENT INFORMATION** Please fill out completely. Foreign registrants—Viticus Group accepts payment in U.S. funds ONLY.

Note: For your security, limited credit card information is required on this form. Viticus Group will contact you to obtain additional credit card information needed to complete payment..

VISA MasterCard American Express Discover Check # _____

Card Holder Name _____

Credit Card Number _____

Billing Address _____ Apt/Ste _____

City _____ State/Prov _____ Zip/Postal Code _____ Country _____

* I have read and agree to the terms & conditions* (required prior to completing the registration).

* I authorize WVC to charge my card for the amount noted above.

Cardholder's Signature _____

Email to send receipt _____

CANCELLATION POLICY:

- All registrations are refundable but nontransferable.
- Requests for refunds must be received at the Viticus Group office in writing via email (support@viticusgroup.org), fax (702.443.9264), or U.S. mail (2425 E. Oquendo Road, Las Vegas, NV 89120) by March 5, 2022. Cancellation questions can be answered onsite at onsite registration.
- Please see [3rd-party] Cancellation Policy for Tours and Activities

GUEST BADGE POLICY: Guest registration allows access to the exhibit hall, social activities, and entertainment events. DOES NOT include access to any scientific sessions. Guests who wish to attend scientific lectures must purchase an additional badge, registering in the appropriate category. For onsite guest registration, the primary participant must be present.

CHILD POLICY: Children under the age of 18 do not require a badge. A child may enter the exhibit hall and certain entertainment events if accompanied by a badged adult. Children under the age of 18 are not permitted in any scientific sessions.

BADGE ENCODING DISCLOSURE: As a conference participant, your contact information is automatically encoded into your badge. When the badge is scanned in the exhibit hall, the encoding supplies your name, mailing address, email address, telephone number, and fax number, if provided. This badge system should be used as a business card and scanned at your discretion.

PRIVACY DISCLOSURE: Viticus Group will not release your contact information to non-exhibiting companies. As a conference participant, your image may be captured and used for future promotional purposes.

To review Viticus Group's Terms & Conditions, please visit viticusgroup.org/legal