Membership Form

Massachusetts Veterinary Medical Association

163 Lakeside Ave.
Marlborough, MA 01752-4554
Direct (508) 460-9333
Fax (508) 460-9969
www.massvet.org

We rely on you to keep your contact and practice information, including your email address, current so that we can provide prompt notice of news and developments that affect you.

Membership takes effect now - December 31, 2027

Name	**Preferred Email**
Home Address (City/State/Zip)	
Home Phone	**Cell Phone**
Are you a practice owner? ☐ Yes ☐ No	**Business Name**
Business Address (City/State/Zip)	
Business Phone	**Website**
Vet School **Year of Graduation**	**Date of Birth** _ _ / _ _ / _ _ _ _
Board Certifications	**Preferred Address** ☐ Home ☐ Business
Gender Identity Prefer not to say ☐ ☐ Male ☐ Female ☐ Non-binary	**Race/Ethnicity Identity** ☐ Prefer not to say ☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American ☐ Hispanic/Latino ☐ Multi-Ethnic ☐ White/Caucasian
How would you prefer to receive the newsletter ☐ Digital ☐ Print	
☐ Full Member (practicing in MA):	$245.00 ($225 if renew by 12/31/26)
☐ Associate Member (live and work outside of Massachusetts, or Academic faculty, or Retired from veterinary medicine):	$135.00 ($115 if renew by 12/31/26)
☐ New Graduate (graduated in last 18 months):	FREE
☐ Student (current student):	FREE
I would like to make a donation to MVMA Charities ☐ Yes ☐ No	$_____
Total Due (Please note that your dues are 75% tax deductible)	$_____

Payment Information

Name on Card:	Authorized Signature:
Billing Address:	
Card Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ (Mastercard/Visa/AMEX)	Exp. _ _ / _ _ Security Code _ _ _ _ (3 numbers on back of card, AmEx- 4 numbers on front)

The MVMA will not share your demographic data.

You can update your member preferences on the MVMA website: www.massvet.org

Please tell us more about your practice/specialties

Animals Seen (Select all that apply)

☐ Large Animal ☐ Small Animal

☐ Avian ☐ Bees ☐ Bovine ☐ Camelids
☐ Caprine ☐ Dog ☐ Equine ☐ Exotic
☐ Farm ☐ Feline ☐ Fish ☐ Food
☐ Laboratory ☐ Other ☐ Ovine ☐ Pocket Pets
☐ Porcine ☐ Poultry ☐ Primate ☐ Rabbits
☐ Reptiles ☐ Ruminant ☐ Swine ☐ Wildlife
☐ Zoo

Practice/Organization Type (Select all that apply)

☐ Clinic ☐ Educational ☐ Government
☐ Hospital ☐ Non-Profit ☐ Pharma
☐ Private Practice ☐ Public Health ☐ Rescue
☐ Research ☐ Shelter/Humane

☐ Speciality: _____

☐ Retired (N/A)

Are you a Mobile (house call) Veterinarian?

Yes No

If Yes, which cities/towns do you cover?

Geographic Served (Select all that apply)

☐ All of Massachusetts

☐ Boston Area ☐ Cape Cod ☐ Central MA
☐ Eastern MA ☐ MetroWest ☐ North Shore
☐ South Shore ☐ Western MA

☐ Other states: _____

Are you a Relief Veterinarian?

☐ Yes ☐ No

If Yes, what is your relief availability?

☐ Days ☐ Nights ☐ Weekdays ☐ Weekends
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday
☐ Friday ☐ Saturday ☐ Sunday

Surgery (Select all that apply)

☐ No Surgery

☐ Laser ☐ Neuro ☐ Oral ☐ Orthopedic
☐ Repro ☐ Routine ☐ Soft Tissue

Services Offered (Select all that apply)

☐ 24/7 Availability ☐ Acupuncture ☐ Allergy ☐ Behavior ☐ Cardiology
☐ Chemo ☐ Chiropractic ☐ Chronic Disease ☐ Complementary ☐ Critical Care
☐ CT Scan ☐ Dental Care ☐ Dental Radiography ☐ Dermatology ☐ Dialysis
☐ Digital Radiology ☐ EKG ☐ Emergency ☐ Endocrinology ☐ Endoscopy
☐ Food Therapy ☐ Hematology ☐ Herbal ☐ Homeopathy ☐ Home Euthanasia
☐ Hospice ☐ Hydrotherapy ☐ Immunology ☐ Infectious Dis. ☐ Internal Medicine
☐ Interventional Radiology ☐ Laser Therapy ☐ MRI ☐ Neurology ☐ Nutrition
☐ OFA X-Ray ☐ Oncology ☐ Ophthalmology ☐ Pain Management ☐ Pathology
☐ PennHIP ☐ Pharmacology ☐ Primary Care ☐ Rehabilitation ☐ Reproduction
☐ Respiratory ☐ Spay/Neuter ☐ Stress Management ☐ Ultrasound

Do you offer low cost/discount programs?

☐ Low-Income ☐ Seniors ☐ Veteran

☐ Other: _____

Emergency and Disaster Response:

☐ Transport large animals ☐ Transport small animals
☐ Shelter large animals ☐ Shelter small animals
☐ Provide direct medical care onsite at emergency
☐ Provide direct medical care at my facility

_____ Initial to opt out of the public Find a Veterinarian directory listing on MVMA's website.

By signing below you attest that all information provided by you in this application is true.

_____

Return form via Mail, Fax, or Email

163 Lakeside Ave, Marlborough, MA 01752
Fax: 508-460-9969
Email: Admin@massvet.org