AIRPORT – The nearest major airport is the Albuquerque International Sunport - airport code ABQ.

LODGING – IVAS has a room block at the Hotel Adaluz Albuquerque. Room rate for a single or double is US$155.00 + tax per night.

 Registration Information
This course is AAVSB R.A.C.E. CE pending for over 160 hours

Enrollment is limited, and acceptance is on a first come, first accepted basis. There will be textbooks that you will be required to purchase. This list will be included in your registration packet.

EARLY REGISTRATION INCENTIVES:
15% TUITION discount for registrations received prior to February 1, 2023 (savings of $900.00)
10% TUITION discount for registrations received prior to June 1, 2023 (savings of $600.00)
CONTACT THE IVAS OFFICE FOR VETERINARY STUDENT DISCOUNT

Registration Fee & Tuition: Full registration fee and tuition for this course is US$6,995.00 when paid by the due no later than dates. This includes all sessions, mentored internship, examinations, Course Notes on USB drive and membership in IVAS through June 30, 2025. The Course Fee Schedule is as follows (all amounts are USD):

<table>
<thead>
<tr>
<th></th>
<th>FULL</th>
<th>10%</th>
<th>15%</th>
<th>Non-Refundable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration Fee</td>
<td>$995.00</td>
<td>$995.00</td>
<td>$995.00</td>
<td>Due no later than July 30, 2023</td>
</tr>
<tr>
<td>Online Portion Tuition</td>
<td>$1,200.00</td>
<td>$1,080.00</td>
<td>$1,020.00</td>
<td>Due no later than September 15, 2023</td>
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<tr>
<td>Onsite Session I Tuition</td>
<td>$1,200.00</td>
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<td>Due no later than October 15, 2023</td>
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<tr>
<td>Onsite Session II Tuition</td>
<td>$1,200.00</td>
<td>$1,080.00</td>
<td>$1,020.00</td>
<td>Due no later than December 15, 2023</td>
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<tr>
<td>Onsite Session III Tuition</td>
<td>$1,200.00</td>
<td>$1,080.00</td>
<td>$1,020.00</td>
<td>Due no later than January 10, 2024</td>
</tr>
<tr>
<td>Onsite Mentorship Tuition</td>
<td>$1,200.00</td>
<td>$1,080.00</td>
<td>$1,020.00</td>
<td>Due no later than January 10, 2024</td>
</tr>
<tr>
<td>Total When Paid by the Due</td>
<td>$6,995.00</td>
<td>$6,395.00</td>
<td>$6,095.00</td>
<td></td>
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<tr>
<td>No Later Than Dates</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

There will be an additional US$250.00 due for payments received after the due no later than date. (This does NOT apply for new registrations)
Name and Degree(s): ____________________________________________________________

Preferred Name for Badge (i.e. Pat for Patricia): __________________________________

Preferred Email: ______________________________________________________________

Preferred Mailing Address: □ Home  □ Business

**Business Information**

Business Name: ________________________________________________________________

Business Address: _____________________________________________________________

City: ___________________________ State/Province: __________ Postal Code: __________

Country: ________________________

Business Phone #: ____________________________

Business Website URL: ________________________________________________________

**Personal Information**

Home Address: ________________________________________________________________

City: ___________________________ State/Province: __________ Postal Code: __________

Country: ________________________

Preferred Phone #: ____________________________  □ Home  □ Business  □ Cell

Your registration includes membership in IVAS through June 30, 2025. One of the benefits of membership is being included in the “Search for a Vet” referral on our website. Please fill out the following information on your **business address** which will be visible to the public or check the box for no information visible:

City: ___________________________ State/Province: __________ Postal Code: __________

Country: ________________________  □ DO NOT LIST ME ON THE IVAS WEBSITE

Veterinary College Attended: ____________________________________________________

Year of Graduation: __________ Vet License State: ______ #: ________________________ Exp: __________

Practice: □ Small Animal  □ Large Animal  □ Mixed  □ Exotic  □ Avian  □ Other

How did you hear about this course and why did you choose to take the IVAS course:

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

If you are a member of AVMA list your member number here: ________________________
2023-2024 IVAS Certification Course
Registration Form (back)

Please Print Legibly

Name: ____________________________________________________________

CHOOSE YOUR FOCUS OF STUDY: This will be for your IVAS Certification.
IVAS offers the ability to specialize your area of focus for your certification. You may choose to focus on small animals, equine or both. Your area of focus will determine your certification and you will need to choose this when you register for the course. This allows IVAS to tailor the hands-on labs for your area of study. IVAS does recommend a focus on both small and large animals as this affords you the greatest opportunities in the future.

☐ Small Animal (Canine)  ☐ Large Animal (Equine)  ☐ Dual (Equine and Canine)

You must submit a copy of your current veterinary license or, if a third- or fourth-year vet student, a letter from the school stating that you are currently enrolled as a veterinary student and your expected graduation date. We also need a quality head shot photo of yourself either emailed or mailed. The photo is used in a roster for all students, teaching associates, lecturers and IVAS staff to help everyone associate names with faces.

I have the following dietary restrictions (i.e. peanut allergy; vegan; no red meat; NONE):

__________________________________________

*******PAYMENT INFORMATION**********

☐ VISA  ☐ MasterCard  ☐ American Express  ☐ Check #______________

I authorize IVAS to charge US$________________________ at this time to my credit card.

Credit Card #_______________________________________

Exp. Date________________ Security Code (3 or 4 digit)___________ Billing Postal Code____________

Billing Country (if not United States)___________________________________________

Signature______________________________________________________________________________

Name as it Appears on Card__________________________________________________________________

MAIL, EMAIL OR FAX THIS FORM (FRONT AND BACK) TO THE FOLLOWING:

International Veterinary Acupuncture Society (IVAS)
PO Box 1283 ● Portland, TX 78374-1184 USA ● Phone: +1-970-266-0666 ● Fax: +1-970-266-0777
Email: office@ivas.org ● Website: www.ivas.org