

## WELCOME! COME JOIN US!

NYSVMS Membership is for NY State Licensed Veterinarians. Please fill out the application below and email to staff@nysvms.org or mail to NYSVMS, 300 Great Oaks Blvd., Suite 314, Albany, NY 12203

Personal Email Address\_\_\_\_\_

Work Email Address

## PERSONAL INFORMATION

First Name	Middle Name
Last Name	
Name of Hospital or Clinic	
Address 1 (work)	
	StateZip
Phone	Fax
Cell Phone	Home Phone
Home Address	
	StateZip
Mailing Address Preference	practice address
Birthday	

## **PROFESSIONAL EXPERIENCE**

Name of Veterinary College

Year of Graduation

Diplomat of

**Practice Specialty:** 
Bovine Equine Small Animal □ Large Animal Mixed □ Large and Small □ Academia □ Institution □ Industry □ Government □ Other Specialty: \_\_\_\_\_

## NYSVMS REGIONAL ASSOCIATIONS

Your NYSVMS state and regional membership dues must be received in order for your application to be processed.

- Capital District | Hamilton, Warren, Washington, Fulton, Saratoga, Montgomery, Schenectady, Rensselaer, Albany, Greene and Columbia Counties.
- Catskill Mountain Otsego, Schoharie, Delaware and Chenango Counties.
- Central New York | Jefferson, Lewis, Herkimer, Oneida, Oswego, Onondaga, Cayuga and Madison Counties.
- □ Finger Lakes | Wayne, Ontario, Seneca, Livingston and Yates Counties.
- Genesee Valley Orleans and Monroe Counties.
- Ulter, Dutchess, Orange and Putnam Counties.
- Long Island Suffolk and Nassau Counties.
- New York City Manhattan, Bronx, Richmond, Kings and Queens Counties.
- □ Northern New York St. Lawrence, Franklin, Clinton and Essex Counties.
- Southern Tier Steuben, Chemung, Schuyler, Tompkins, Tioga, Cortland and Broome Counties.
- Uwestchester/Rockland Westchester and Rockland Counties.
- Use Western New York Chautauqua, Erie, Niagara, Cattaraugus, Genesee, Wyoming and Allegany Counties.
- By checking this box, I affirm the following statements: I hereby certify that I am a graduate veterinarian and apply for membership in the New York State Veterinary Medical Society and the indicated regional association. I agree to be governed by their Constitution and by-laws and the AVMA code of ethics.

Signature\_\_\_\_\_

QUESTIONS? Please contact NYSVMS headquarters at (518) 869-7867