

APPLICATION FORM FOR: Diagnostic Pathology Symposium: Diagnostic Pathology of Bovine Diseases, October 17, 2014, Friday, 8am- 5:50pm, Crown Center Sheraton Hotel, Kansas City, MO, in conjunction with the 54th Annual AAVLD annual meeting

Without exception, each person attending this symposium must submit an application form. I hereby apply for enrollment in the Symposium on Diagnostic Pathology of Bovine Diseases and agree to hold The C. L. Davis, DVM Foundation, its officers and faculty and the AAVLD, free of any loss or complaint which may arise from their conduct of the aforementioned program, or any action any one of them may take in relation to this application. "This program was reviewed and approved by the AAVSB RACE program for 8 hours of continuing education in jurisdictions which recognize AAVSB RACE approval. Please contact the AAVSB RACE program at race@aavsb.org if you have any comments/concerns regarding this program's validity or relevancy to the veterinary profession."

DATE: _____ SIGNATURE OF APPLICANT: _____
(Submit entire page)

Name: _____ Degrees: _____
(Block print your name as you want it to appear on your certification.)

Address: _____

Phone: _____ Fax: _____

E-Mail address: _____

Total amount enclosed: _____

(Please make checks payable to C.L. Davis Foundation or circle the credit card and indicate the card number and expiration date below: DISCOVER; VISA; MASTER CARD; AMEX EXPRESS

Card # _____ Expiration Date _____

Send your application to: The Charles Louis Davis Foundation, 6245 Formoor Lane, Gurnee, IL 60031-4757 USA, Telephone: 847-367-4359, Fax 847-247-1869, Email: cldavisdvm@comcast.net

Additional information and registration materials are available at the CL Davis Foundation Web site: <http://www.cldavis.org> or call 847-367-4359.