



What is AAVD?

The mission of the American Academy of Veterinary Dermatology is to promote scientific progress in the field of veterinary dermatology.

Membership in the AAVD is open to all veterinarians who are interested in veterinary dermatology.

Members serve in government and industry, private veterinary practice, academia, and as consultants for a wide range of clients. Many of our members are board-certified veterinary dermatologists and others are veterinary practitioners with a strong interest in dermatology.

Affiliate Membership is open to non-veterinarians who are interested in veterinary dermatology.

Please consult the AAVD website for additional membership information:

<http://aavd.org/MembershipInfo.aspx>



www.aavd.org

The American Academy of Veterinary Dermatology (AAVD) was founded in 1964 in order to further scientific progress in veterinary and comparative dermatology. The AAVD does this by:

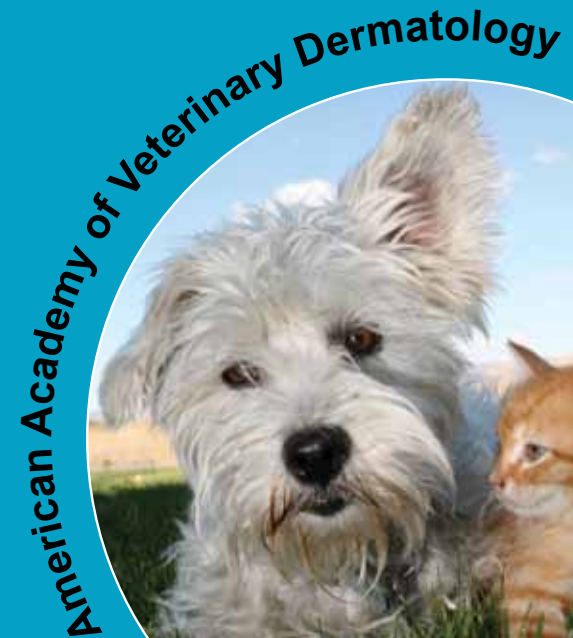
- Coordinating and funding research and scholarships in veterinary dermatology.
- Providing an exclusive organization for dedicated individuals who devote professional activity to research, teaching, or practice of skin diseases of animals.
- Furthering dermatologic education by providing meetings, seminars, and courses where results of advanced studies in dermatology are presented.
- Publishing the Derm Dialogue, a newsletter for AAVD members.



American Academy of Veterinary Dermatology

www.aavd.org

777 East Park Drive, PO Box 8820
Harrisburg, PA 17105-8820
1-877-SKINVET (754-6838)
aavd@pamedsoc.org





Membership Application

Year _____

American Academy of Veterinary Dermatology

Name: _____ Title: (DVM, etc.) _____

Name of Practice or Institution: _____

Business Address: _____

Street _____

City/State/Postal Code/Country _____

Home Address: _____

Street _____

City/State/Postal Code/Country _____

Business Phone: _____ Home Phone: _____
(International #'s – please include country code)

Preferred address: (check one) Work Home Birthdate: (MM/DD/YYYY) _____

Fax: _____ Email: _____

Veterinary School: _____ Year: _____

Professional Activity:

- Private Practice
- Industry
- Specialty Dermatology Practice
- Research
- Academia
- Other

Memberships:

- ACVD Diplomate
- ESVD Member
- ACVD Resident
- Other
- ECVD Diplomate

If you are submitting an application as a new member, please send this completed application along with the application fee. Once your membership is approved, we will invoice you for your membership dues.

Please consult the AAVD website or call our office for additional membership information, current application fee and dues amounts: <http://aavd.org/MembershipInfo.aspx>

My check/money order is enclosed (Payable to AAVD in US Dollars, drawn on a US bank/institution)

OR

I would like to pay my application fee by Visa or MasterCard as follows: (complete all information)

Visa/MasterCard #: _____ Exp Date: _____ Sec. Code: _____

Name printed on Card: _____

Total amount to be charged: _____ Signature: _____

Please mail your payment and this completed form to:

Administrative Secretary, AAVD Membership
777 East Park Drive, PO Box 8820, Harrisburg, PA 17105-8820
Phone: 1-877-SKINVET (754-6838) • Fax: 717-558-7841 • Email: aavd@pamedsoc.org