



# The American Association of Human-Animal Bond Veterinarians

618 Church Street, Suite 220 • Nashville, TN 37219

615-254-3687 • 615-254-7047 fax

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## Membership Form

(Please type or print legibly)

New Member

Renewing Member

### Membership Type

Member Veterinarians ..... \$35.00  
 Association Member (Non-Veterinarians) ..... \$35.00

Student Member ..... Complimentary  
 Charter Member ..... Complimentary

### Member Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Preferred Method of Contact:  Business Address  Home Address  E-Mail

How did you hear about AAH-ABV? \_\_\_\_\_

### Education, Certifications & License

Veterinary College \_\_\_\_\_ Degree \_\_\_\_\_ Year Graduated \_\_\_\_\_

Other Degrees \_\_\_\_\_

Specialty Board Certification(s) \_\_\_\_\_

State(s) Where Licensed \_\_\_\_\_

AVMA Membership:  Yes  No

Other Veterinarian or Human-Animal Bond Associations \_\_\_\_\_

Are you faculty of a veterinary school? If so, which University/College? \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I hereby apply for membership in the American Association of Human-Animal Bond Veterinarians for one full year.

Remit Checks to: American Association of Human-Animal Bond Veterinarians • 618 Church Street, Suite 220 • Nashville, TN 37219