



2017 MODERATOR REQUEST FORM
Long Beach, California | June 29-July 2, 2017

Thank you for your interest in moderating at the 2017 Pacific Veterinary Conference. Please submit completed form to Lily Briggs at lbriggs@cvma.net. A CVMA staff member will contact you with further information.

All moderators MUST be a CVMA member and registered for the conference.

Date: _____

Name: _____

Address: _____

City | State | Zip: _____

Best Phone Number: _____ Email: _____

Degree(s): _____

- Yes, I am a CVMA member
- Yes, I am registered for the conference.
- No I am not a member but would like to join. Please contact me.

Please check the days of availability. Moderators must moderate a minimum of 8 sessions.

Thursday Friday Saturday Sunday

I am interested in moderating for the following tracks. Please check your 1st three choices.

- | | | | | | | |
|---|--------------------------|---|--------------------------|---|--------------------------|-----------------------|
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Avian Exotics |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Equine |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Mixed Animal |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Practice Management |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Shelter Medicine |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Small Animal Medicine |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Small Animal Surgery |
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | Technician Track |

Comments: _____

If you have any questions please contact Lily Briggs at 916-649-0599, or via email lbriggs@cvma.net