Florida VETERINARY MEDICAL ASSOCIATION

2027 STUDENT MEMBER RENEWAL

RENEWAL INFORMATION

Full Name: _____ D.O.B.: _____ Gender: _____

Current Home Address: _____

Personal Email: _____ Phone: _____

Acredited Veterinary School: _____ City, State: _____

School Email: _____ Graduation Date: _____

Note: **Why do we ask for two email addresses?** Well, it's simply so we can keep in touch with you once you've graduated!

MEMBERSHIP TYPE

☐ **DVM STUDENT***
*Must be a current DVM student at an AVMA-accredited veterinary college.
Expiration date 12/31/2027.

FREE

WHAT SECTIONS ARE YOU ASSOCIATED WITH?

☐ Small Animal ☐ Equine ☐ Food Animal

☐ Exotic/Avian ☐ Other: _____

FAEP MEMBERSHIP

FAEP
Florida ASSOCIATION OF EQUINE PRACTITIONERS

The Florida Association of Equine Practitioners (FAEP) is the equine-exclusive division of the FVMA. The FAEP's mission is to support the professional development of its members and to educate them on conditions affecting the equine industry. The FAEP is dedicated to improving the well-being of equines in the state of Florida.

☐ **Yes, please process my FAEP membership at no additional cost.**

AFFIRMATION STATEMENT

By signing here, you are affirming that you are a current college of veterinary medicine student from an AVMA-accredited college. You understand the membership runs in a calendar cycle from January - December 2027, and you agree to update any changes in address to not delay any communication.

Signature: _____ **Date:** _____

7207 Monetary Drive | Orlando, Florida 32809
Phone: 407-851-3862 | Fax: 407-240-3710 | membership@fvma.org | www.fvma.org