



Veterinary Comparative Respiratory Society

The Veterinary Comparative Respiratory Society is a not-for-profit organization whose purpose is to provide a forum for the discussion of the anatomy, physiology, and pathophysiology of the respiratory system, and the diagnosis and treatment of respiratory disease in all animals. The VCRS sponsors lectures at major veterinary meetings, an annual scientific symposium, an internet web page, and a research award. The Joan O'Brien Research Award is a monetary and plaque award given in recognition of Dr. O'Brien's work and presented at the VCRS symposium to the outstanding resident/graduate student research presentations.

Annual membership is \$50 (\$25 for graduate students or residents). Membership includes reduced registration at the annual VCRS scientific symposium and a copy of the meeting proceedings (even if the member chooses not to attend the meeting). Membership dues will be due on the first of June each year. Interested persons should send the completed membership form with appropriate payment or credit card information to Susan Brogan, Office of Continuing Education, Cummings School of Veterinary Medicine, Tufts University, 200 Westboro Road, North Grafton, MA 01536, USA. You may also email the information to: susan.brogan@tufts.edu, or fax to (508) 887-4539.

The **28th Symposium of the Veterinary Comparative Respiratory Society** will be held **September 28-30, 2010** in Raleigh, North Carolina. The theme of the meeting will be **"Respiratory Response to Insult - Adaptive or Maladaptive?"**. Check out our website (www.the-vcrs.org) for more information.

2010 VCRS Membership Application

PLEASE PRINT Name: _____ Title: DVM PhD Other _____

Address: _____

E-mail Address: _____ Telephone: _____

Membership: Regular (\$50) Student (\$25)

I would also like to contribute \$ _____ to the Joan O'Brien Research Fund.

The VCRS is operated in the United States as a 501-C-3 Not-for-Profit Educational organization. Donations to the Joan O'Brien Research Fund are tax deductible to the extent allowed by the I.R.S.)

Interests (Clinical, Teaching, Research) _____

Method of Payment: Check Mastercard Visa

Credit Card # _____ Expiration Date _____