

Veterinary Defence Association America

RN 66926273 NFP Illinois Corp ACT 805 ILCS 105/1986

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Full Nama

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APPLICATION FOR VDA MEMBERSHIP

[PLEASE USE BLOCK LETTERS]

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Email:						
Phone (H):			Phone (W):			
Cell phone:			Fax:			
Physical Address:						
			State:		Zip:	
Mailing address: (if different)						
			State:		Zip:	
Veterinary School:						
	Qualifications	:	Y	ear o	of Graduation:	
State Veterinary Medical Board:			License #:			
Practice name/Place whe Relief service provided:						
Company name (if appli	icable):					
Professional Activity:	Small Animal:	%	Large Animal:	%]	Equine:	%
Exotics: %	Avian:	%	Other (please specify):	•		%
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Names of Other Veterinarians in Your Practice (Please complete a separate application for membership for each member in your practice)			
1.	6.		
2.	7.		
3.	8.		
4.	9.		
5.	10.		

List of all prior Claims & Board complaints (license defense) (Please attach a separate page with further details if necessary)				
Date	Details	Outcome		
Interial non-disclosure of all prior Complaints and Claims may lead to loss of membership benefits				

I agree to the terms and conditions for VDA membership.	(Please check to show you agree)	

1. **VDA MEMBERSHIP**

- 1.1 Basic VDA \$99.00 annually, pro-rata to the month of joining. The VDA year end is May 31st. This includes VDA Bulletins, Notices, Consent forms, certificates and newsletters. All additional services will be billed separately.
- 1.2 Please mail a check made out to the VDA America, along with your application form to: VDA America, 8915 Skipping Rock Lane, Summerville, South Carolina, 29485
- 1.3 Alternatively, you may pay by Pay Pal, using the link on our website at www.vda-america.org.

2. **VDA MEMBERSHIP AGREEMENT**

I, the undersigned, agree to the following terms and conditions

- The VDA material that will be supplied to me during the period of my membership is strictly copyrighted and I agree not to copy or 2.1. disseminate this material in any manner for any purpose outside of my practice or to non-VDA members, especially, but not limited to VDA consent forms. I agree to destroy or delete all of this material upon termination of my VDA membership.
- 2.2. I understand that it is recommended that I should remain a VDA member for the duration of my career as a practising veterinarian and that I should apply for run-off protection and insurance cover for at least three years after I retire.
- 2.3. I understand that resignation takes place at year-end by submitting a completed VDA Resignation Form (obtainable on application) and that I will be required to provide two months' notice to the VDA of my intention to resign or retire as a member.
- 2.4. I will at all times act with the highest honesty and integrity towards the VDA, its insurers, partners, agents and associates.
- 2.5. In the event of a dispute with the VDA and/or its directors, consultants, staff, agents or representatives ('the organization'), I agree to use the organization's alternate dispute resolution procedures. I hereby absolve the organization from all actions, arising directly or indirectly from my membership.
- 2.6. I understand that membership is provided subject to the terms of the articles of association of the VDA.
- 2.7. I understand that the VDA communicates with its members only by e-mail and on its website at www.vda-america.org especially but not limited to, the material contained in My VDA. I agree that the onus is on me to receive, read, implement and abide by the contents thereof, and to notify the VDA of any changes to my email address.
- 2.8. I will contact the VDA and will follow the VDA's advice and guidance whenever I am faced with an incident, event, occurrence, adverse treatment outcome, situation, complaint, dispute or claim in my practice that may lead to a formal complaint or claim against me. I understand that, due to the difficulty experienced by VDA Consultants in making contact with its busy member practitioners, the onus will also be on me to continue the contact with the VDA Consultant as my matter or case progresses.

- 2.9. I will follow the protocols and will abide by the requirements contained in the VDA's documentation, including the VDA's articles of Association, VDA website, membership and other application forms, VDA bulletins, VDA notices and VDA newsletters and I agree to abide by the VDA's Claims Prevention Program and Claims Management Program.
- 2.10. I will use the approved VDA Informed Consent to Treatment Form in accordance with VDA Bulletin 13.
- 2.11. I will use the VDA certificates or a certificate that I have submitted to the VDA and has been approved by the VDA, in accordance with VDA Bulletins 4, 5 and 6.
- 2.12. I will regularly refer to my online VDA File and Information in MyVDA at www.vda-america.org and, I will conduct a refresher course on this information at least once every six months with my veterinarians and staff and will review the contents with any new veterinarian or staff member that joins my practice.
- 2.13. I will notify the VDA immediately of any incident, event, occurrence, adverse treatment outcome, situation, complaint, dispute or claim arising against me or my practice and I will not communicate with the claimant, plaintiff or complainant or his or her legal representatives or anyone related to the claimant or plaintiff or any third party without the VDA's knowledge and written consent.
- 2.14. I will do nothing that can be construed as colluding with the client/claimant/plaintiff and will do nothing to damage or circumvent the settlement or defense of the matter.
- 2.15. I undertake to supply all information and documents requested and/ or relevant to the matter timeously and to provide my full cooperation at all times

Applicant's Signature	Date	

Office Use Only			
Membership No.	AM	Date received:	
Referrer:		Assigned Consultant:	

Congratulations on joining the VDA family!

You have become a member of an elite club of veterinarians whose common interest is the protection of veterinarians in private veterinary practice who face disputes, complaints and litigation. The VDA is a mutual non-profit professional defense association of veterinarians that operates for veterinarians, is run by veterinarians and is dedicated to safeguarding your interests and to protecting you and your practice from the financial and psychological stress and damage caused by disputes and litigation.

The VDA is wholly owned by its members (American Veterinarians) and is governed by an executive committee appointed by a board of directors. Surpluses are injected back into the association to expand and improve services.

The mission of the VDA is to protect the professional integrity and reputation of its members. The VDA achieves this by providing a complete bouquet of protection and defense services to its members.

This bouquet includes:

- Immediate assistance and guidance with problems, disputes and practice management issues provided by the VDA's trained veterinary Consultants.
- Alternate Dispute Resolution with aggrieved clients.
- Complete defense in State veterinary board disciplinary proceedings (veterinary license defense), malpractice lawsuits and in any other administrative tribunal, consumer tribunal or any other legal or statutory forum.
- o Claims Prevention measures, including consent forms, model certificates and VDA Bulletins detailing protocols on best practice.
- o Representation of members' interests in legislation affecting the veterinary profession.
- Access to the profession's own veterinarian psychology counsellor for members who experience anxiety, stress, depression, burnout or have suicidal feelings.
- o Regular information updates via e mail and on our website at www.vda-america.org
- o Join the VDA on LinkedIn, Like us on Facebook and Follow us on Twitter.

Where did you hear about the VDA?

☐ From another member	☐ On the web, via search engine	☐ On a web search using the VDA web address
☐ Through the	Ve	terinary organization
Other:		