

ARAV SPEAKER FORM

If you are interested in becoming a speaker for ARAV, please complete the form in its entirety and submit to Colin McDermott, ARAV Education Committee Chair at cmm.com@gmail.com

SPEAKER LOCATION:		
Institution/Hospital Name: VCA Florid	da VEterinary League	
Street Address:		
City:	FL State:	Zip Code:
Country: USA		
SPEAKER CONTACT INFORMATION	l:	
Name: Ariana Finkelstein		
Email: drfpetemergency@aol.com		
2108635791 Phone Number:		
Website: https://vcahospitals.com/florid	la-veterinary-league?utm_so	ource=maps&utm_medium=organic&u
Preferred Method of contact:	<u></u>	
SPEAKING AVAILABILITY:		
Suggested Topics: triage for emergen	су	
basics in husbandry, so you want to be a		
Maximum time/distance willing to tr	avel: 1 h	
Ability to lecture remotely (Zoom/S	kype etc): 🗹 Yes	No
Expenses:		
☐ I require reimbursement of tra	avel expenses	
✓ I do not require reimbursemer	nt of travel expenses	