

Tail Blazers Agility Club Beginners Registration

Please complete this form and mail it with other required documents to our Beginners Training Director (see below). It helps us to create a class roster, track contact information, and to learn more about you and your dog.



Handler Name _____

Address _____

Home phone _____ Cell phone _____

Email _____

Emergency contact Name _____

Emergency contact Phone: _____ Relationship: _____

Dog's call name _____ Breed _____

Age _____ Sex _____ (**circle one:** intact/ neutered /spayed)

Dog's previous training (Beginners obedience required! Must have good recall (come), stay, sit and lie down). Feel free to add additional classes on the back of the form:

Trainer: _____

Classes taken: _____

How did you hear about our club? _____

Please mail the following items to our Beginners Training Director:

1. This completed registration form
2. A signed training waiver and a signed COVID waiver.
3. A copy of your dog's rabies certificate

Please return form to:

Barbara Brandt, c/o TBAC, PO Box 560, Newtown Square, PA 19073

Email: brb694@yahoo.com; cell: (609) 513-8798