



**Application for TDAA
Club Membership**

_____ Host Club Membership \$20 _____ New _____ Renewal

A copy of the Club's by-laws, or a copy of the Business' corporate papers, and a copy of the current Liability Insurance Policy **MUST** accompany this application. (For new club)

Host Club Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Club Phone: _____ E-Mail: _____

FAX: _____ Website: _____

Current President: _____

Phone Number: _____ E-Mail: _____

Agility Contact Person: _____

Phone Number: _____ E-Mail: _____

Mailing Address if Different from Club:

To: _____

Address: _____

City: _____ State: _____ Zip: _____

Year Club began: _____ Year Club Began Agility: _____

Will this be the first Agility Trial held by this club? _____

If no, what agility organization trial(s) have been held? _____

If two clubs or more joining to have TDAA trials, need name of joined club.

Send completed application to: TDAA, P.O. Box 158, Maroa, IL 61756