



Tampa Bay Agility Club Membership Application

Name:

Date:

Address:

E-mail Address:

Address:

Phone:

City/State/Zip:

Occupation:

Membership Type:

- Regular (individual 18 years of age or older)
- Junior (individual under age 18, will not be eligible to vote)

If applicable, list the names of current TBAC members from the same household:

Please select all that apply:

- Agility Exhibitor – AKC (you have handled a dog at an AKC-licensed event within the past two years)
- Agility Exhibitor – USDAA (you have handled a dog at a USDAA-licensed event within the past two years)
- Agility Exhibitor – Other (you have handled a dog at events other than AKC and USDAA within the past two years) Please list the other organizations:
- Breeder (someone who has registered a litter within the past three years)
- Dog Owner (not actively breeding or exhibiting dogs)
- Agility Judge – AKC (AKC-licensed agility judge)
- Agility Judge – USDAA (USDAA-licensed agility judge)
- Agility Judge – Other (licensed agility judge other than AKC and USDAA) Please list:
- Agility Instructor
- Agility Trial Secretary – AKC (AKC-licensed trial secretary)
- Agility Trial Secretary – USDAA
- Agility Trial Secretary – Other, Please list

Agility trial worker experience, please select all that apply:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Chief Course Builder | <input type="checkbox"/> Worker Hospitality | <input type="checkbox"/> Ring Steward |
| <input type="checkbox"/> Chief Ring Steward | <input type="checkbox"/> Scribe | <input type="checkbox"/> Sheet Runner |
| <input type="checkbox"/> Equipment Manager | <input type="checkbox"/> Timer | <input type="checkbox"/> Bar Setter |
| <input type="checkbox"/> Volunteer Coordinator | <input type="checkbox"/> Course Builder | <input type="checkbox"/> Chute Setter |
| <input type="checkbox"/> Judges Hospitality | <input type="checkbox"/> Leash Runner | <input type="checkbox"/> Ribbon Table |

Number of years you have been involved in agility:

Number of years you have been involved in dog related activities:

Information about your dog(s):

Name:

Name:

Breed:

Breed:

Sex:

Sex:

Date of Birth:

Date of Birth:

AKC Registered?: Yes No

AKC Registered?: Yes No

Agility Titles – AKC:

Agility Titles – AKC:

Agility Titles – USDAA:

Agility Titles – USDAA:

Agility Titles – Other Org.:

Agility Titles – Other Org.:

Other activities and titles:

Other activities and titles:

Name:
Breed:
Sex:
Date of Birth:
AKC Registered?: Yes No
Agility Titles – AKC:
Agility Titles – USDAA:
Agility Titles – Other Org.:
Other activities and titles:

Name:
Breed:
Sex:
Date of Birth:
AKC Registered?: Yes No
Agility Titles – AKC:
Agility Titles – USDAA:
Agility Titles – Other Org.:
Other activities and titles:

Are you a member of any other dog-related clubs? Yes No
If so, please list the name and location:
If so, do you plan to remain a member of that club(s) if granted membership to TBAC? Yes No
Are you currently in good standing with the American Kennel Club? Yes No

Applicants must be sponsored by two TBAC members in good standing.

Sponsor Name (1):		Signature (1):	
Sponsor Name (2):		Signature (2):	

Membership fee is \$10.00 a year per individual.

Applicant's Signature: _____

Or

Entering Applicant's name below constitutes an electronic signature:

For Club use: Board Member Approval (1) Board Member Approval (2) Board Meeting General Meeting Approved Notified
