



TDAA Dog Registration Form

Return with \$15.00 payment to:

Teacup Dogs Agility Association
 W6485 County Road H
 New Glarus, WI 53574
 via PayPal or Zelle at:
teacupagility@gmail.com

Dog's Name: (The name used on titling certificates) _____

Dog's Call Name: _____

Dog's Breed: _____

Dog's Date of Birth: _____

Gender: _____

Have you registered a dog with TDAA previously?

Yes:

No:

Owner: (The name used on titling certificates) _____

Mailing Street Address: _____

City, State and Zip: _____

Primary Phone #: _____

Secondary Phone #: _____

Email Address: _____

Your dog's TDAA number will be emailed to you at this address. Provide updated email when applicable.

There is no refund of this dog registration fee for any reason.

If you pay using PayPal or Zelle, please indicate what you are paying for with the payment.

Office Use

Date _____

Pymt _____

Amt _____

___ Dog # _____

___ Person # _____

___ Create PDF ___ Height Cert ___ Temp Height Form

___ Email PDF

___ Enter AUD