



Sanctioned Group Application

Group NAME:

CONTACT PERSON: _____

NADAC Membership Number: _____ Expiration Date: _____
(required)

Street Address: _____ Phone: _____

City: _____ State: _____ Postal Code: _____

E-Mail: _____

**The designated Contact Person is required to maintain a valid email address with NADAC AND join the NADAC Community Forum at <https://nadaccommunity.com>.
You will also be listed as the Contact on the list of NADAC Sanctioned Clubs.**

OFFICERS:

Name of **President**: _____ Phone: _____

Street Address: _____

E-Mail: _____

Name of **Secretary**: _____ Phone: _____

Street Address: _____

E-Mail: _____

Name of **Treasurer**: _____ Phone: _____

Street Address: _____

E-Mail: _____

Name of

INSURANCE COMPANY: _____

Policy # _____

Street Address: _____

Policy
Expiration Date: _____

City: _____ State: _____ Postal Code: _____

Phone Number: _____

PLEASE ATTACH A COPY OF PROOF OF INSURANCE

List of Available Equipment in Good Repair and that meets NADAC's Specifications:

_____ Dog Walk
_____ A-Frame
_____ Open Tunnels

_____ Wingless Jumps
_____ Winged Jumps
_____ Hoops

Weave Poles:
_____ sets of 6
_____ sets of 12

PLEASE NOTE: There is a \$100.00 (US Funds) Application Fee due with the submission of this form.

By signing this application, I/we agree that one of the purposes of this Group is to support the sport of dog agility for all dogs, including mixed breeds, and that the Group supports the humane treatment of animals.

President: _____

Date: _____

Group
Contact Person: _____

Date: _____

Please email completed application and proof of insurance to
Support@nadac.com