NDGAA New Member Application

Applicant Personal Information

Name:	
Address:	
City/State/Prov:	
Zip/Postal Code:	
Country:	
Date of Birth:	
Home Phone:	
Email Address:	

National Dog Groomers Association
PO Box 101, Clark, Pennsylvania 16113
Phone: (724) 962-2711
Fax: (724) 962-1919
www.nationaldoggroomers.com

Applicant Professional Information

Mail will be sent to business address unless otherwise requested.

Business Name:	
Business Address:	
City/State/Prov:	
Zip/Postal Code:	
Business Phone:	
Business Email:	
Position:	
How Long?	

New Applicant Registration Fee - $90.00

- ◯ Charge my Visa
- ◯ Charge my Mastercard
- ◯ Charge my American Express

Card Number:	
Expiration Date:	
Cardholder Name:	
Security Code:	

◯ My payment will be by check or money order
Canadian checks/money orders please send **$96.00** in US Funds.

YOUR BACKGROUND - List a brief history of years grooming, graduated from, apprenticed under, accomplishments, etc.

Thank you for choosing National. The applicant must ascribe to our "Code of Ethics". Please allow 4 weeks for processing of your Registered Membership. Membership is non-transferable and subject to revocation. The information given on this application is true and correct to the best of my knowledge.

Your Name: _____ **Date:** _____