

ACT Companion Dog Club (CDC) X-Factor Flyball – Expression of interest form

Are you are current member of CDC Yes No

Do you have an AFA CRN? If so, please provide: A B C D

(this a number issued to members of the Australia Flyball Association)

Handlers Details:

Surname:				Ph:			Mob:		
First name/s:	1.	2.	3.	4.	5.				
Surname of each person if different from principal handler:									
Age and name if under 16									
Address:									
Email(s):									

Dog Details:

	Dog's Name	Breed	Date of Birth	Sex (M/F)	Vaccination Date
1					
2					
3					

Fees:

If you are a current member of CDC and are participating in other activities at the Club you will need to complete an 'Additional Activity' form and pay an extra activity fee of \$90 (for first dog) and \$67.50 (for each additional dog) *if you are accepted into Flyball classes* (GST incl) and before you commence training.

If you are not a current member of CDC *and are accepted into Flyball classes* you will need to join the Club before you commence training. The Club's joining fee is \$90, annual membership fee is \$135, and activity fee is \$90 for first dog & \$67.50 for each additional dog (GST incl).

The Flyball Training Manager will advise you how to access the relevant forms and make payment *if you are accepted into Flyball classes*.

Prior Activities:

Please tick any activities that you have undertaken with your nominated dog/s:

Dog 1: CDC Behaviour Training Agility Dances with Dogs Obedience Trialling/Rally Tracking Trick Dog
 Dog 2: CDC Behaviour Training Agility Dances with Dogs Obedience Trialling/Rally Tracking Trick Dog
 Dog 3: CDC Behaviour Training Agility Dances with Dogs Obedience Trialling/Rally Tracking Trick Dog

If you have participated in CDC Behaviour Training what level of training have you completed with your nominated dog/s:

Dog 1: Foundation Consolidation Graduation Companion
 Dog 2: Foundation Consolidation Graduation Companion
 Dog 3: Foundation Consolidation Graduation Companion

Questionnaire:

Please answer the questions below. This information will provide your trainers with insight into your handler capabilities and background information to ensure a safe and enjoyable transition into Flyball.

Do you have reasonable control of your dog under distractions?

Does your dog have reactivity/aggression issues?

Does your dog have any physical limitations (eg past injuries)?

What motivates your dog?

Please provide any additional information that may be pertinent to training your dog in a group class situation.

Please tell us how you heard about Flyball at CDC? (tick all that apply):

- Internet search /website Transfer from another club Word of mouth (family, friends, work colleagues)
 Have been a member in the past Current member/instructor (please provide name)
 Other (please specify):

Send completed form to contact@actcdc.org.au or post to ACT Companion Dog Club, PO Box 4048 Kingston ACT 2604

Flyball Training Manager Information

Accepted into training classes YES/NO DATE: / /

Intake lecture attended YES/NO DATE: / /

Membership status and fee payment confirmed with Club Office YES/NO DATE: / /

Training commencement DATE: / /

Progression Notes