

# BDTA

## Drop In & Learn Classes

November 15<sup>th</sup>, 22<sup>nd</sup>, 29<sup>th</sup>, December 6<sup>th</sup>

6:30 PM-7:30 PM



Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Dog's  
Name \_\_\_\_\_ Age \_\_\_\_\_ Breed \_\_\_\_\_

What would you like help with?  
\_\_\_\_\_  
\_\_\_\_\_

What date(s) are you interested in?

Nov 15<sup>th</sup> \_\_\_\_ Nov 22<sup>nd</sup> \_\_\_\_ Nov 29<sup>th</sup> \_\_\_\_ Dec 6<sup>th</sup> \_\_\_\_

\$10 per date

Mail application, copy of up-to-date vaccinations and check made out to BDTA to:  
Nancy Kieffer 457 ½ Whitestown Rd. Butler, PA 16001