

Dog Scouts of America No Contact Agility Merit Badge

Dog's Name:	,DSA	Handler:	
This certificate certifies that the dog and handle Merit Badge, according to the high standards s trained to perform the specified behaviors using	et out b	y Dog Scouts of Americ	ca. This dog was
required knowledge.			acouts of An
Handler Signature:		Date:	a Complete
Evaluator Signature:		Date:	

Cut at line above, keep top portion for your records, and send the bottom portion to DSA for processing.

Fill out this form completely and legibly. Once the badge requirements are met, the in-person Evaluator will sign the completed form certifying that you and your dog met the badge requirements.

- Cut the form at the designated line and mail only the bottom portion to the Merit Badge Recording Secretary Julie Benson, 30911 Jasper Ridge, Novi, MI 48377 or you may scan and e-mail the completed form to dsavideoeval@gmail.com.
- All video evaluations must be e-mailed to dsavideoeval@gmail.com.
- Badge Payment of \$25 should be included with this Badge Form (check or money order made payable to Dog Scouts of America) OR submitted on-line using a credit card at https://form.jotform.com/41833666336965. You can include a copy of the e-mailed receipt when mailing or e-mailing this Badge Form.
- Optional: Include \$3 for each additional patch, if any, that you would like of this badge.



NO CONTACT AGILITY Badge Form

Dog's Name:	DSA Handl	ler's Name:	
Full Mailing Address:			
Phone: ()	Email:		Troop #:
I would like additiona	l patches of this merit badç	ge (I have included f	or \$3 each)
The signatures below certify that the dog standards set out by Dog Scouts of Ame positive training, the dog has earned the	rica. Signature of handler verifies the	at this dog was trained to pe	erform the specified behaviors usin
Handler Signature:		Date:	- 0 1111 010011
Evaluator Signature:		Date:	O At Camp —— O By Video
Evaluator print name:			