



Groom Elite Registration

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Barn #: _____ Trainer's name: _____

Phone number:

Daytime: _____ Evening: _____

Email address: _____

Please contact me by:

- Daytime phone
- Evening phone
- Email

I am registering for:

- Groom Elite 101
- Groom Elite 201
- Trainer Elite 301
- Owner Elite 101

I will pay:

- by check via mail
- by cash on the first day of class

Please make all checks payable to The Backside Learning Center and mail them to:

**The Backside Learning Center
704 Central Ave.
Louisville, KY 40208**

