Texas Academy of Animal Control Officers

BACT Registration Student Personal Information

Social Security Number _____ Course # _____ Date _____

Name: Last _____ First _____ MI. _____ Date of Birth: (MM/DD/YYYY) _____

Physical Address _____ City _____ State _____ ZIP _____

Mailing Address _____ City _____ State _____ ZIP _____

Sex _____ DL/ID# _____ Home Phone Number _____

Alt/Cell# _____ Email Address _____ Shirt Size _____

Current Employer _____ Phone Number _____

Employer Address _____ Supervisor Name _____

Student Status _____ Name of High School or College _____ Field of Study/Major _____

Date of course attending _____ ☐Yes ☐No _____ $250.00 deposit attached.

☐Check # _____ ☐Money Order # _____ ☐Credit Card _____

Method of Payment

CC# ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐

Credit Card Number:

Credit Card Name: _____ Type: _____ Expiration (MM/YYYY) _____ Security Code: _____

Amount paid: ☐$600.00 ☐$650.00 ☐$850.00 to include lodging

Attach required documentation to this form as well as your deposit or full tuition payment Have hand-delivered or sent certified mail to: TAACO 332 E. Cuero St., Giddings, TX 78942

Proverbs 12:10 "A righteous man always cares for his animals."