NOVICE HUNT APPLICATION

	*(REQUIRED FIELDS)		
*MENTOR NAME (FIRST, I	MIDDLE INITIAL, LAST)		
*ADDRESS, INCLUDING ZIP	CODE		
*DNR CUST. ID	PHONE	CELL	
E-MAIL		I NEED A STUDENT	YES OR NO
(Please note that all mentors must have a minimum of 5 years hunting experience for LTH species being hunted.) Mentors will have to sign a release for the DNR to do a background check. Form is available on <u>www.dnr.state.wi.us</u> . Search "background check." Form must be submitted at least 30 days prior to event and resubmitted every 5 years after approval.			
*STUDENT HUNTER NAME (FIRST, MIDD	LE INITIAL , LAST)		
*STUDENT ADDRESS (STREET, CITY,	ZIP CODE)		
*STUDENT IS ELIGIBLE FOR THE "LEARN TO H AN	UNT DEER" PROGRAM(DID NO IY PREVIOUS YEARS.) YES		NG LICENSE LAST YEAR OR
*DNR CUSTOMER ID #	*	DATE OF BIRTH	
To obtain a customer ID#, call the DNR service I Social Security nu	ine at 1-888-936-7463 between mber, as well as their height, we	•	eed to provide the students
	QUESTIONS AND CONDITIO	NS	
1. IF SELECTED, THE "NOVICE HUNTER HUNTERS SAFETY CLASS IS "NOT" F SUBSTITUTE FOR THE FOUR HOUR TI TRAINING PRIOR TO THE HUNT WEE	REQUIRED FOR THIS HUNT. CON RAINING REQUIREMENT. A DAT	IPLETING A HUNTERS SAI E WILL BE CHOSEN TO CO DONE AT THE MacKenzie	FETY COURSE IS "NOT" A IMPLETE 3 HOURS OF THIS
2. DID PARENTS OR GUARDIAN GIVE PE YES OR	ERMISSION FOR STUDENT TO BE NO (NO RESPONSE EXCLUDES		MED DURING THE EVENT?
3. I WOULD BE FINE HAVING A CAMERA	A CREW COME ALONG TO FILM AGREE? YES OR		D MINORS PARENTS MUST
4. I PLAN ON STAYING AT THE Mac	Kenzie Center ON FRIDAY AND S YES OR NO	SATURDAY NIGHTS WITH	MY NOVICE STUDENT.
5. KAMO EVE	ENT FORMS AND WAIVERS COM	IPLETED YES OR NO	
6. MENTOR HAS COM	PLETED AND SUBMITTED DNR B	ACKGROUND CHECK YE	S OR NO

FORM MUST BE COMPLETE FOR STUDENT AND MENTOR TO BE ELIGIBLE FOR LTH EVENT