

Student Information Form

COMPLETE THIS FORM FOR STUDENTS NOT PRE-REGISTERED AND CANNOT REGISTER ONLINE

STUDENT INFORMATION PLEASE PRINT CLEARLY (* required information)

* First Name: _____ MI: _____ * Last Name: _____ Suffix: _____

* Mailing Address: _____ * Physical Address: _____

* City: _____ * State: _____ * Zip: _____

* Phone: _____ * Date of Birth: _____ (month/day/year)

* Email: _____ * Gender: _____

* Emergency Contact Name: _____ * Phone: _____

PLEASE CIRCLE THE PRIMARY REASON YOU OR YOUR CHILD ARE TAKING THIS COURSE FROM THE LIST BELOW:

To legally buy a hunting license and go hunting

To learn something about firearms and safety

To learn to hunt safely

My parent made me take it

The possibility of hunting in the future

To learn something about wildlife and hunting

To be able to go shooting for recreation

To obtain your concealed weapons permit

Other

OPTIONAL INFORMATION (CIRCLE RESPONSE)

Ethnicity: American Indian Asian/Pacific Hispanic White African American (Black) Other

Disability/Impairment: None Visual Hearing Reading Mobility Other

Education: (highest grade attained): 3 4 5 6 7 8 9 10 11 12 GED

High School Grad College Student College Grad Other

CLASS INFORMATION (To be completed by instructor)

Student Certification No.: _____ Class ID: _____

Class Type: HE _____ BHE: _____ Bow: _____ Trapper: _____ Wolf Trapper: _____

Instructor-led: _____ Field Day Only: _____

Instructor: _____

Course Fee (\$8) Paid by: Check _____ Check # _____ Cash _____

