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 _______