



Student Registration

Please complete each of the following questions to secure your spot in an Explore Bowhunting class. This information will only be used by Kentucky Fish & Wildlife for program administration and evaluation, and for communication with you about Explore Bowhunting and related opportunities. If you are under age 18, you must complete this form with a parent or legal guardian.

Pictures and Video may be taken as promotional material for the Explore Bowhunting program to be used by the Kentucky Department of Fish and Wildlife Resources. No personal information will be provided while marketing the program.

First Name: _____ MI: _____ Last Name: _____

School/Organization (Where your Explore Bowhunting class will be held) _____

Address: _____

City: _____ State: _____ ZIP Code: _____

County: _____

Phone: _____ E-mail: _____
(Primary use of contact for Explore Hunting events)

Date of Birth: _____ SSN: (Last 4 digits) _____

Are you interested in receiving information about future hunting opportunities? Yes No

Parent or Guardian's Signature (if under the age of 18)

Print

Signature

Date