



Youth Hunter Application
Special Youth Challenge Ministries of Iowa
4785 240th Ave. Webb, Iowa 51366

Name: _____ Age: _____ D.O.B. _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email Address: _____

My Shirt Size: _____ My Pants Size: _____ My Shoe Size: _____

(CIRCLE THE APPLICABLE ANSWERS BELOW)

I (have) or (do not have) a hunter certification card.

I (have) or (have not) been hunting before.

I (have) or (have not) fired a gun. (If so, what kind?) _____

I am (on therapy/treatment) or (off therapy/treatment).

If selected to hunt, I would need the following special equipment: (wheel chair, gun rest, heater, other): _____

I understand that a chaperone/supervisor will be with me during the hunt. If possible, I

Would like to have (name) _____ (relationship) _____

_____ accompany me.

