

YOUTH HUNTER EDUCATION CHALLENGE

PARTICIPANT REGISTRATION FORM



administered by the
Florida Fish and Wildlife Conservation Commission
and the
National Rifle Association



Name: _____ Date of Birth: _____ Female Male

Mailing Address: _____

City: _____ State: _____ Zip: _____

County: _____ E-mail: _____

Telephone: Home (____) _____ Cell: (____) _____

Date of Hunter Safety Certification: _____ Student Number: _____

Please Provide the name and address of parent or guardian to contact for further information:

Daytime Phone: (____) _____ E-mail: _____

Relationship: _____

Mail to: Youth Hunter Education Challenge C/O FL Fish & Wildlife Conservation Commission
7325 N.E. 170th Avenue Silver Springs, FL 34488 352 625-2804 FAX (352) 625-0333

For more information, visit MyFWC.com/YHEC

