CONNECTICUT WATERFOWL ASSOCIATION



Waterfowl Mentoring Program



JUNIOR MEMBER AND ADULT NOVICE HUNTER APPLICATION

Name *		Phone *
First	Last	
Address *		
Line 1	City	Zip Code
Line 2	State	Email
Date of Birth *	I certify that I have completed the Connecticut Conservation Education/ Firearms Safety Course (or equivalent).	Certificate # *
older, also possess a Connecticut Migratory Bird waiver and release agreement form that indemni negligent actions on my part. Parents and guardi	small Game Firearms License prior to participating Conservation Stamp and a Federal Migratory Bird fies the Connecticut Waterfowl Association and m ians should note that all youth hunters (< 18 years and the youth's parent (or guardian) or another adu	l Conservation Stamp. Also, I agree to sign a ny mentor from any liability caused by of age) must be accompanied by two adults.
If under the age of 18 years, please have your p	arent or legal guardian fill out and sign the secti	on below:
I, am the parent or legal guardian, and I hereby ξ experience and licensing to function as a mentor	give permission for him or her to hunt with a ment for hunting.	or that I acknowledge meets the legal age,
Junior Hunter	Mentor	
Signature of Parent or Guardian		_ Date:
Parent or Guardian Phone:	Parent or Guardian	n Email:
Acknowledgement of Application		
Signature:	Date:	