2019
MISSOURI YOUTH HUNTER EDUCATION CHALLENGE
VOLUNTEER STAFF REGISTRATION
June 7 – 9

Please Print Clearly

Name _____

Street Address _____

City _____ State _____ Zip _____

Home phone ( ) _____- _____ Email? _____

Missouri Department of Conservation employee? Title _____

If You Are A Hunter Education Instructor, Hours Worked _____ HEI # _____

I can help: ___ Friday morning set-up at United Sportsman's Club 8:00 am

___ Friday afternoon: *(Check one)*
- ___ Archery
- ___ Muzzleloader

___ Saturday: *(Check one)*
- ___ .22 Rifle
- ___ Sporting Clays (Saturday only event)
- ___ Archery
- ___ Wildlife Identification (limited staff needs)
- ___ Responsibility Exam (limited staff needs, morning only)
- ___ Muzzleloader
- ___ Hunter Safety Trail
- ___ Orienteering (afternoon only)
- ___ Concession
- ___ Use me anywhere

___ Sunday: *(Check one)*
- ___ Orienteering
- ___ Archery
- ___ .22 Rifle
- ___ Muzzleloader
- ___ Hunter Safety Trail
- ___ Concession
- ___ Use me anywhere

AGREEMENT:

I understand and agree to abide by the rules of conduct prescribed in the official Rule Book and that any violation(s) can result in a denial of volunteer privileges and service opportunities. I also agree that, if necessary, emergency medical assistance may be provided for my benefit. I hereby give consent for Missouri YHEC to provide medical attentions, transportation, and emergency medical services as warranted. In signing this agreement, I declare that I am in good physical condition and I am not aware of any disease or injury that would result in injury during participation in this program.

Signature _____ Date _____

Return this form to: Missouri YHEC, PO BOX 189 Fair Grove, Mo 65648
By June 1, 2019