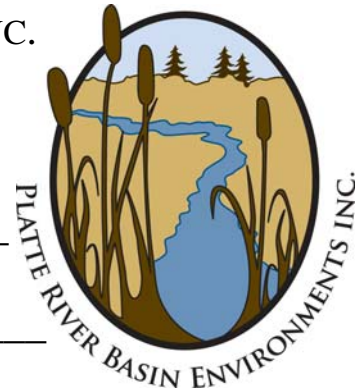


PLATTE RIVER BASIN ENVIRONMENTS, INC.

YOUTH MENTOR HUNT APPLICATION



Name _____

Address _____

City/State/Zip _____

Phone _____



Date of Birth _____

Hunter Safety Card No. _____



Medical conditions or medications which the mentors need to be aware of: _____

Parent/Guardian



Ducks Unlimited

Name _____ Address _____

City/State/Zip _____

Phone _____

Emergency contact if Parent/Guardian cannot be reached:



Parental Release

I, the undersigned parent or guardian of the youth named in this application for participation in the Youth Mentor Hunt program assume full responsibility for risks associated with this activity. I recognize the activity may cause damage to property or injury or death to participants. I agree to hold harmless Platte River Basin Environments and the mentors involved in the program for any damages or bodily injury or death to the participants sustained in consequence of the aforesaid permitted activity not caused by their direct negligence.

Parent/Guardian

Signature _____ Date _____

WRITE A BRIEF STATEMENT ABOUT YOUR PAST HUNTING EXPERIENCE, IF ANY, AND WHAT YOU WOULD LIKE TO LEARN AND EXPERIENCE FROM A MENTOR HUNTING PROGRAM.

WHAT SPECIES ARE YOU INTERESTED IN HUNTING (DUCKS, GEESE, PHEASANTS, TURKEY, DEER, ETC.)

PLEASE LIST YOUR AFTER-SCHOOL, EVENING AND WEEKEND COMMITMENTS (SPORTS, CHURCH, SCOUTS, WORK, ETC.)

SUBMIT APPLICATIONS TO: PRBE, PLATTE VALLEY BANK, 1212 CIRCLE DR., P.O. BOX 2308, SCOTTSBLUFF, NE 69363 **BY SEPTEMBER 1**. APPLICATIONS WILL BE CONSIDERED ON A FIRST-COME BASIS. APPLICATIONS RECEIVED AFTER SEPT. 1 WILL BE CONSIDERED IF OPPORTUNITIES ARE AVAILABLE. QUESTIONS CAN BE DIRECTED TO WWW.NEBWILD.ORG, OR RANDY AT 308/631-4747.