













# MN VETERAN OUTDOOR PROGRAMS PHYSICALLY DISABLED VETERANS DEER HUNT October 5 - 7, 2021 PLEASE PRINT ALL INFORMATION:

Name:			
Address:			
City:	State	:	Zip Code:
Phone Number:		Age:	Weight:
(WHEELCHAIR VETERAN	IS RECEIVE PI	REFERENC	E)
Briefly describe physical / medical	disabilities:		
Difficulties with outdoor temperat	ures: Yes	No	
Describe any special needs, assista	nce, and/or equi	pment you w	vill need:
Do you require the use of a wheelc	hair far indanar	adonas. Vas	No
•	-		utches other:
Please identify items used (if any):			
List any current medications taken	1:		
Emergency contact person		Phone	number
Allergies (be specific):			
Last year you deer hunted at Riplo	ey:	Last year y	ou fired a weapon:
Do you have a weapon available to	use: Yes	No	
If yes, please indicate: Shotgun	Black Pov	vder	(Rifles not permitted)
Branch of Service:		ınk:	# of Years Served:
WWII: Korea:	Vietnam:	Desert Sto	rm: Afghanistan Iraq

- 1. Our screening committee will review all applications.
- 2. All applicants will be notified by mail after September 1, 2021as to their selection.
- 3. Hunt will be held on TUESDAY- THURSDAY, October 5-7, 2021
- 4. Questions concerning this hunt should be directed to Thomas Kramin (320) 292-5996 or Email: mnvetsoutdoors@gmail.com

# **APPLICATIONS MUST BE RECEIVED BY: August 21, 2021**

SPACE IS LIMITED, APPLICATIONS WILL BE PLACED IN THE GENERAL LOTTERY.

Return applications to:

MN VETERAN OUTDOOR PROGRAMS 576 CONCORD DR CHASKA, MN 55318

### \*\*MANDATORY TRAINING\*\*

\*\*All participants <u>MUST</u> attend this training to be included in the program\*\*
Hunter Safety Education Training
CAMP RIPLEY
Tuesday, October 5, 2021
Event Center
10:30 a.m. - 1:30 p.m.

Applicant's Signature x			Date:	
	FOR OFFIC (To be completed	E USE ONLY by screening t	eam) 	
a.	Veteran's application has been <u>completely</u> filled	out. Yes	No	
b.	Veteran has met physical disability criteria:	Yes	No	
	Coordinator	Date Reco	eived	-

Please complete the following information. Note that this information will ONLY be used if you are selected as a participant in the event. Completing this section does not guarantee your selection.

### **Hunting Partner**

You have the option of selecting a family member or friend as your experienced hunting partner OR allowing us to partner you with an experienced hunter.

Please identify your preference regarding the hunting partner	:	
Yes, I have an experienced partner. His/her name is: _ Partner Email Address:	Partner Phone #:	
No, please provide me with an experienced Volunteer		

## Lodging

There are two options as to lodging for the event. Camp Ripley will provide lodging at no charge for Hunters and Partners or you can find your own lodging. Please indicate your preference below:

Yes, please provide me with Lodging No, I do not require Lodging

\*\*\* Please list any special requirements you have for lodging in the space provided below: