**North Carolina Wildlife Resources Commission**

**2017 State Youth Hunter Skills Tournament Registration Form**

 **TOURNAMENT INFORMATION**

|  |  |
| --- | --- |
| TOURNAMENT DATE: | Saturday, April 29, 2017 |
| LOCATION: | Camp Millstone, Ellerbe, NC |
| REGISTRATION DUE: | APRIL 15th |
| MAIL REGISTATION AND FEES TO:($100 per team)($20 for individual competitor)  | Carissa Shelton carissa.shelton@ncwildlife.org163 Pinnacle DriveWaynesville, NC 28786 |

**TEAM INFORMATION** (mark all that apply: \_\_\_ JR / \_\_\_ SR /\_\_\_ FFA /\_\_\_ 4-H)

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| --- | --- |
| TEAM NAME: |  |
| SCHOOL NAME: |  |
| INSTRUCTOR NAME: |  |
| INSTRUCTOR PHONE: |  |
| INSTRUCTOR EMAIL: |  |
| TEAM RSO: |  |
| # of participants |  |
| # of coaches |  |

**PARTICIPANT INFORMATION**

*Please print students name, include the student’s hunter education certification number and their date of birth for example, 01/01/00. Indicate the event by using an "X".*

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| **NAME** | **RACE** | **SEX** | **HE CERT #** | **BIRTH****DATE** |
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I affirm that the above students are certified hunter safety students currently enrolled in the above school and the certification number and birth date of each contestant is valid.

COACH’S SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARTICIPANT INFORMATION *(continued)***

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| TEAM NAME: |  |
| SCHOOL NAME: |  |

*Please print students name, include the student’s hunter education certification number and their date of birth for example, 01/01/00. Indicate the event by using an "X".*

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| **NAME** | **RACE** | **SEX** | **HE CERT #** | **BIRTH****DATE** |
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I affirm that the above students are certified hunter safety students currently enrolled in the above school and the certification number and birth date of each contestant is valid.

COACH’S SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_