



## Challenged Hunter of the Year Award Application

Application Date: \_\_\_\_\_

*Please list the name of the nominee and the sponsor.*

**Nominee Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Age: \_\_\_\_\_

Disability/Illness : \_\_\_\_\_

\_\_\_\_\_

Number of deer/large game taken since disabled: \_\_\_\_\_

\_\_\_\_\_

**Sponsor Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Relation to nominee: \_\_\_\_\_



*Award Nominee Information (page 2)*

**History of nominee's disability/illness, how long and other details:**

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**Describe noteworthy nominee rehabilitation experiences:**

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**Please describe actions of nominee to give back to hunting/conservation/others and achievements in this area:**

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