



Hunt of A Lifetime Foundation, Inc.
OUTFITTERS / GUIDE / CHARTER QUESTIONNAIRE

Applicant Information

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

Website: _____

Services Offered: (Please include the type of animal or fish, hunt or fishing trip)

Season Months: (Please include whether it is beginning season, mid-season or end season)

Other Services included: (Please indicate if any of these services would be included)

Food Yes | NO Licenses/Permits Yes | NO Transportation Yes | NO Lodging Yes | NO

Blinds Yes | NO Firearm Furnished Yes | NO Bow Furnished Yes | NO Range for Sighting Yes | NO

Fishing Equipment Furnished Yes | NO Misc. Equipment Yes | NO Handicap Accessible Yes | NO

State/Providences/Services area offered: _____

Length of Stay of Trip: _____ Charges/or Donation \$ _____

Comments: _____

This is Needed for all who are coming on Board!!

Please list three (3) references (Name and Phone number) We Must Have These To Proceed!

1. _____
2. _____
3. _____

Signature _____

IF YOU HAVE INSURANCE, ASSESSMENT COPY OF YOUR LIABILITY POLICY MUST BE ATTACHED. If you have any questions please contact Tina Pattison at (814) 572-4387.

Please return to the Hunt of A Lifetime Foundation, Inc.

Mail to:

Hunt of A Lifetime Foundation, Inc.

P.O. Box 241

Harborcreek, PA 16421