**OUTFITTER/CLIENT AGREEMENT and HUNT RESERVATION FORM**

---deposit is required for application approval---

---please print---

*Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ALS #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work/cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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

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

*Email*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hgt: \_\_\_\_\_\_\_\_Wgt: \_\_\_\_\_\_\_\_\_*

*Emergency Contact Name & Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*List allergies or medical problems: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Medical history or condition that may, in any way, affect your hunting ability (fear of Heights) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Circle the type of hunt:*  archery Firearm Muzzleloader

*Hunt dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Total hunt price: $\_\_\_\_\_\_\_ -- $\_\_\_\_\_\_\_\_ Deposit = Balance due: $\_\_\_\_\_\_*

**Agreement**

*Obligations of the Outfitter.* In performing the services list above, Gin Ridge Outfitters (License #: XXXX) promises to do the following:

* Provide a licensed professional hunting guide.
* Use diligence and safety in all matters for the client, but it is understood that many things can effect hunting (ie. weather, your preparedness, physical condition, etc) and we do not guarantee success.
* Work hard throughout the year scouting, running cameras, putting in and maintaining food plots to insure you a good chance at being successful.
* Assist in the recovery of your game as well as field dressing if needed.
* Provide proper care of trophies in the field and while in hunting camp.

*Client's obligations.* Client shall:

* Provide own personal clothing, equipment, and weapon.
* Be effective with the weapon and take an ethical shot.
* Pay costs of the license fees, meat processing, taxidermy which includes shipping of hides and antlers, and any other shipping costs.
* Pay for food, lodging and transportation costs for dates, lodging and meals are not included.
* Obey all laws and conduct him/herself in a reasonable, prudent and safe manner under any circumstances.
* Client hereby agrees and acknowledges that he or she has had ample opportunity to investigate and study the inherent dangers and risks associated with engaging in the activities and services set forth above and that Gin Ridge Outfitters will not be held liable for injury or illness while on property and pertaining to adverse weather (snow, sleet, ice, wind), rugged terrain, and dangers posed by wild animals. Client expressly agrees and acknowledges that he accepts and consents to all the risks associated with any activity as part of this agreement.
* Client also agrees that he or she is in the appropriate physical condition and possesses the sufficient outdoor and hunting or fishing skills too reasonably undertake the services set forth herein and to fully participate in and enjoy the same despite the inherent risks and hardships.
* If while on your hunt, you are unable to hunt due to illness or you are hurt, sorry but there is no refund.

IN WITNESS WHEREOF by their signatures below, the parties agree and acknowledge that they have read the foregoing and agree to be bound by the same. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Client Signature (for youth hunters a parent or guardians signature) Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Youth Client Signature Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Outfitter Signature- Todd Phillips (#xxxx) Date

**Please return to us with an original signature, no copies is accepted. Thank you!**

Return with deposit to:

Todd Phillips, Gin Ridge Outfitters (Please make check payable to Gin Ridge Outfitters)

206 North Price Street

Industry, IL 61440