



# MOUNTAIN GIRL OUTDOORS

## REGISTRATION FORM

(PLEASE PRINT)

Today's date: \_\_\_\_\_

### CLIENT INFORMATION

Last name:		First:	Middle:	Marital status (circle one) Single / Mar / Div / Sep / Wid	
Is this your preferred name? <input type="checkbox"/> Yes <input type="checkbox"/> No		If not, what is your preferred name?		Birth date: / /	Age:
Street address:				Home phone no.: (    )	
City:		State:	ZIP Code:	Cell phone no.: (    )	
Occupation:		Employer:			
Chose MGO because/ Referred to MGO by (please check one box): <input type="checkbox"/> Family <input type="checkbox"/> Friend <input type="checkbox"/> Close to home/work <input type="checkbox"/> Passing by office <input type="checkbox"/> Other _____ <input type="checkbox"/> Facebook <input type="checkbox"/> Website <input type="checkbox"/> Business card					
If someone recommended us, who can we thank?					
In what outdoor activities are you already involved?					
Are you involved in or a member of outdoor groups, past or present? (Girl Scouts, NWTF, RMEF, NRA, etc.)					
What times and days work best for you to participate or would you be willing to participate?					

### PARTICIPATION INFORMATION

For what class, activity, or personalized experience are you registering?
What do you expect to learn, gain or experience during what you are registering?
What is your experience level for what you are registering?
Is there anything in your past experience that we need to know or you think we should know? For example: victim of domestic violence, fear or phobia of something in particular, PTSD, veteran, physical or other limitations, severe allergies, etc. This is only for our information to better assist you and will be kept confidential unless you volunteer your information during the interaction with other.
If you are registering for a class, activity, or personalized experience that includes firearms, are you legally eligible to possess or use a firearm?

## PLEASE TELL US MORE ABOUT YOUR INTERESTS

Please tell us what other activities or subjects you are/would be interested in participating or learning more about by checking the following.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 3 gun                               | <input type="checkbox"/> Camping                         | <input type="checkbox"/> Horsemanship                |
| <input type="checkbox"/> Air rifle                           | <input type="checkbox"/> Canoeing                        | <input type="checkbox"/> Hunter safety class         |
| <input type="checkbox"/> Ammunition and patterning           | <input type="checkbox"/> Chain saw usage                 | <input type="checkbox"/> Intro to archery            |
| <input type="checkbox"/> Astronomy                           | <input type="checkbox"/> Composting                      | <input type="checkbox"/> Intro to pistol             |
| <input type="checkbox"/> ATV usage                           | <input type="checkbox"/> Concealed carry                 | <input type="checkbox"/> Intro to rifle              |
| <input type="checkbox"/> Back-country botany                 | <input type="checkbox"/> Conservation                    | <input type="checkbox"/> Intro to shotgun            |
| <input type="checkbox"/> Backpacking                         | <input type="checkbox"/> Container gardening             | <input type="checkbox"/> Journaling                  |
| <input type="checkbox"/> Backyard poultry                    | <input type="checkbox"/> Cowboy action shooting          | <input type="checkbox"/> Judging distance            |
| <input type="checkbox"/> Bait-casting/bass fishing           | <input type="checkbox"/> Cut flower arranging            | <input type="checkbox"/> Kayaking                    |
| <input type="checkbox"/> Basic digital photography           | <input type="checkbox"/> Deer hunting /biology/CWD       | <input type="checkbox"/> Knife sharpening            |
| <input type="checkbox"/> Bats, bugs, & critters of the night | <input type="checkbox"/> Elk hunting /biology            | <input type="checkbox"/> Land navigation/ geocaching |
| <input type="checkbox"/> Bear hunting/biology                | <input type="checkbox"/> Field care of game              | <input type="checkbox"/> Mushrooms                   |
| <input type="checkbox"/> Bee keeping                         | <input type="checkbox"/> First aid and CPR               | <input type="checkbox"/> Native American culture     |
| <input type="checkbox"/> Beer making/ tasting                | <input type="checkbox"/> Fly fishing                     | <input type="checkbox"/> Outdoor cooking             |
| <input type="checkbox"/> Big game/small game hunting         | <input type="checkbox"/> Fly tying                       | <input type="checkbox"/> Pet first aid/CPR           |
| <input type="checkbox"/> Bird watching                       | <input type="checkbox"/> Game Calling                    | <input type="checkbox"/> Pistol shooting             |
| <input type="checkbox"/> Boating Safety                      | <input type="checkbox"/> Gardening for Wildlife          | <input type="checkbox"/> Rappelling                  |
| <input type="checkbox"/> Building an AR                      | <input type="checkbox"/> Habitat Improvement             | <input type="checkbox"/> Reloading                   |
| <input type="checkbox"/> Ropes and knots                     | <input type="checkbox"/> Tracking & reading sign         | <input type="checkbox"/> Water ecology               |
| <input type="checkbox"/> Self defense                        | <input type="checkbox"/> Trapping                        | <input type="checkbox"/> Waterfowl hunting           |
| <input type="checkbox"/> Spelunking                          | <input type="checkbox"/> Tree ID                         | <input type="checkbox"/> Wildlife rehabilitation     |
| <input type="checkbox"/> Sporting clays                      | <input type="checkbox"/> Tree stand & blind introduction | <input type="checkbox"/> Wine making/ tasting        |
| <input type="checkbox"/> Survival in the wilderness          | <input type="checkbox"/> Turkey hunting /biology         | <input type="checkbox"/> Zip line                    |
| <input type="checkbox"/> Taxidermy/mount care                | <input type="checkbox"/> Upland game hunting             | Other: _____   |

## IN CASE OF EMERGENCY

Name of local friend or relative (not living at same address):	Relationship:	Home phone no.: (    )	Work phone no.: (    )
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The above information is true to the best of my knowledge. I understand that all information I provide will not be shared with anyone other than those in the MOUNTAIN GIRL OUTDOORS organization on a need to know basis. I understand that my deposit is nonrefundable and I am financially responsible for any balance.

\_\_\_\_\_  
*Signature/ Parent/ Guardian*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Print Parent/ Guardian*