



2016 – 2017 MUY GRANDE DEER CONTEST

ENTRY # _____

DATE: _____

NAME: _____

RANCH ENTRY: ___ Yes ___ No If yes, how many entries _____

RANCH NAME: _____

CONTACT PERSON FOR RANCH: _____

MAILING ADDRESS: _____

(STREET OR PO BOX)

(APARTMENT OR SUITE #)

(CITY)

(STATE)

(ZIP CODE)

PHONE NUMBER: _____

(CHILDREN 16 YEARS AND YOUNGER, PLEASE LIST PARENT OR GUARDIAN'S NUMBER)

EMAIL: _____

YOUTH: ___ Yes ___ No If yes, please provide date of birth: _____

(MM/DD/YYYY)

RETIRED MILITARY ___ Yes ___ No

ACTIVE DUTY MILITARY ___ Yes ___ No