

TOMO is designed to teach safe hunting practices to students who have no previous outdoor hunting experience. This program will increase their awareness and the value of wildlife and the natural environment by encouraging experienced adults to "pass on" traditional outdoor skills.

TOMO emphasizes teaching safe and ethical hunting, the conservation and responsible use of our natural resources and character education.

### The TOMO program targets two focus areas:

- Outreach addresses the need to assist families, minorities, single-parent families, and others by allowing their children to experience outdoor hunting activities in a controlled, supervised environment. The program is specifically targeting students ages 10 through 18 who have no experience shooting or hunting.
- TOMO provides a specific mechanism for students ages 10 through 18 to learn about safe and ethical hunting and the conservation and responsible use of our natural resources. These youth will be paired with volunteer hunting club members and private land owners who sponsor and actively participate in a year-round hunting and shooting sports mentorship program.



For individuals already possessing hunting experience or are new to the sport and seeking hunting opportunities, check out the SCDNR Wildlife Management Area properties and the Draw Hunt Program. To find more information, look for the current SCDNR Rules and Regulations or go to [www.dnr.sc.gov](http://www.dnr.sc.gov).



In South Carolina, hunting and fishing are fundamental parts of our great outdoor heritage, a legacy that must be passed on from one generation to the next. Contact TOMO if you are interested in becoming a mentor.

Complete application on the back of this brochure and submit to:



TOMO Program, SC DNR,  
PO Box 167, Columbia, SC 29202-0167  
1-800-277-4301

Also visit DNR at: [www.dnr.sc.gov](http://www.dnr.sc.gov) click on Education, Hunting or Special Programs, then click on Take One Make One™.

### SPONSORS

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The South Carolina Department of Natural Resources prohibits discrimination on the basis of race, color, national origin, disability, gender, religion or age. Direct all inquiries to the Office of Human Resources, PO Box 167, Columbia, South Carolina, 29202.

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11-7481



# TAKE ONE MAKE ONE™



**Taking Charge of  
Tomorrow – You Can Be a  
Part of Our Heritage!**



**DNR**

**South Carolina Youth/Young  
Adult Hunting & Shooting  
Sports Mentorship and  
Recruitment Program**

[www.dnr.sc.gov](http://www.dnr.sc.gov)

Cut along the dotted line and return to: TOMO, SCDNR, PO Box 167, Columbia SC 29202-0167



**DNR**

**TAKE ONE**



**MAKE ONE™**

**STUDENT APPLICATION**

[www.dnr.sc.gov](http://www.dnr.sc.gov)

## Waiver and Release from Liability for the **Take One Make One™** Program

I hereby forever **RELEASE AND DISCHARGE** the South Carolina Department of Natural Resources, its employees and agents, from any and all liabilities, claims, demands, or causes of action that I may hereafter have for injuries and damages arising out of my participation in the activities of the **Take One Make One™** program.

I further agree that **I WILL NOT SUE OR MAKE A CLAIM** against the released parties for damages or other losses sustained as a result of my participation in the **Take One Make One™** program. I also agree to **INDEMNIFY AND HOLD THE RELEASED PARTIES HARMLESS** from all claims, judgments, and costs including attorney's fees, incurred in connection with any action brought as a result of my participation in the **Take One Make One™** program.

I understand that because of the risks involved in the activities of the **Take One Make One™** program, the **RELEASED PARTIES** are making no warranty of any kind, express or implied, concerning any and all equipment or facilities provided by the **RELEASED PARTIES**. Outdoor activities can be dangerous and associated equipment such as rifles, shotguns, firearms ammunition, archery equipment, and motor vehicles do not always function the way they are expected to perform. My signature or that of my parent or legal guardian below certifies that I have read this form carefully and that I understand the risks associated with the activities of the **Take One Make One™** program.

Parent/Guardian Name: (print) \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Note: Parent/Guardian may need, to provide transportation to and from hunting areas.**

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip County

Telephone: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ School/Organization: \_\_\_\_\_

Sex: Male  Female  Race: White  Hispanic  Black  Asian  Other

List any medical conditions such as allergies that the SCDNR needs to be aware of \_\_\_\_\_

1. Are you Hunter Education certified? Yes  No  If yes, hunter education number? \_\_\_\_\_
2. Have you ever hunted before? Yes  No  If yes, how many years have you hunted? \_\_\_\_\_
3. Have you ever harvested an animal? Yes  No  If yes, what type? \_\_\_\_\_
4. Which hunting activities interest you most? *(Please check all that apply)*  
Deer  Turkey  Waterfowl  Dove  Small Game (Squirrel, Rabbit, Quail)
5. What type of hunting equipment do you have access to? \_\_\_\_\_
6. How did you hear about the TOMO Program? Hunter Ed. Class  Event  Friend  Website  Other