



Loud Thunder Forest Preserve
October 19-26th, 2013
Veterans Handicapped Archery Hunt
Archery Deer Permit Application



To qualify for a permit you must provide the Rock Island County Forest Preserve District proof of your disability for example handicap parking placard, IL DNR handicap crossbow permit, or doctor's statement.

Section 1.

Applicants full name _____

Street address _____

City, State, Zip Code _____

Day time phone number _____

Home phone number _____

Are you wheelchair bound? YES or NO (please circle one or the other)

Please provide us with your needs for accommodation due to your disability. If you need additional space please use the back of this form. _____

Do you have your own bow? YES or NO (please circle one or the other)

If you do not have someone who will be assisting you during the hunt would you like to be assigned a volunteer? YES or NO (please circle one or the other)

Do you have your own personal stand or blind you wish to hunt from? YES or NO

Section 2. (Complete only if you have someone who will be assisting you the entire duration of the hunt. This individual is not allowed to harvest a deer, they are there to assist you to your location and on any recovery efforts for any deer harvested.)

Hunter Assistant's name _____

Street address _____

City, State, Zip Code _____

Phone Number _____

Applications must be completed and returned by September 20th.

Return to: Loud Thunder Forest Preserve Rock Island County Forest Preserve
19408 Loud Thunder Road or 1504 - 3rd Avenue
Illinois City, IL 61259 Rock Island, IL 61201
Phone 309-795-1040 Phone 309-558-3593

Successful applicants will be notified by October 1st, 2013

I hereby declare that the above information is true and correct. Providing false information will void your permit application.

Applicants signature _____