



**Youth Application**

Name: \_\_\_\_\_ DOB \_\_\_\_\_ AGE \_\_\_\_\_

Illness/Disability \_\_\_\_\_

If Life Threatening, is this individual aware of the life-threatening condition? Y\_\_ N\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Clothing Sizes: Jacket \_\_\_\_\_ Shirt \_\_\_\_\_ Pant \_\_\_\_\_ Boots \_\_\_\_\_

**Medical Information**

Physicians Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Treatment Facility/Hospital: \_\_\_\_\_

**Physical Limitations: (check all that apply)**

None  Crutches  Splint  Artificial Limb  Wheelchair  Walker

Orthotics  Amputation  Cochlear Implant/hearing Aid  Glasses/Contact Lenses

Other (Please explain)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Needs or Accommodations:**

\_\_\_\_\_  
\_\_\_\_\_

**Parents / Guardian Information**

**Father Name:** \_\_\_\_\_

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

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

**Phone** \_\_\_\_\_

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

**Mother Name:** \_\_\_\_\_

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

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

**Phone** \_\_\_\_\_

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

**Who has legal custody of child?** Father \_\_\_\_\_ Mother \_\_\_\_\_ Both \_\_\_\_\_

What Type of Outdoor activities is your child interested in?

Hunting  Fishing  Camping  Other: \_\_\_\_\_

\_\_\_\_\_

Has Child ever hunted/fished/camped before?  Yes  No If Yes Please Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does Child Currently Have A Hunting / Fishing License?  Yes  No

Has Child ever taken a hunter safety course?  Yes  No If yes When? \_\_\_\_\_ Where? \_\_\_\_\_

How did you hear about C MO KIDS? \_\_\_\_\_

Note: Physicians please ATTACH a statement as to the type of Life-Threatening or Disability the applicant has.

I certify that the above is true to the best of my knowledge.

\_\_\_\_\_

Guardian Signature

\_\_\_\_\_

Guardian Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Date