

REGISTRATION FORM

Becoming an Outdoors-Woman — September 10, 11, 12, 2010

Only one person may register per form. Please photocopy for additional registrations.

PLEASE PRINT LEGIBLY

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone: Work _____ Home _____
 Email address: _____

Age Group:
 18-30
 31-40
 41-50
 51-60
 61 and over.

The applicant, by signing below, recognizes that the program involves some risk and that she/he takes responsibility for all action or injury that may result by participating. I understand that photographs and/or filming may occur during the sessions and may be used in future support of the program.

Applicant signature: _____

Medical Form Enclosed

Do you want your name, email or phone # included on a list that will be shared with other participants? Yes No

Have you ever attended a BOW weekend in New Hampshire before? Yes [what year(s)? _____] No

If yes, are you bringing a new participant with you? Yes No Name of new participant: _____

YOU MUST SELECT YOUR TOP SIX COURSE CHOICES by ranking them from 1 to 6 (1 being your 1st choice) **IN EACH SESSION**. Courses are filled in the order in which the registrations are received. Space is limited, so please choose several courses per session. **Please strike out courses that you do not wish to take part in.**

- | | | | |
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| <p>SESSION 1</p> <p><input type="checkbox"/> 1-A. Intro. to Firearms & Safety</p> <p><input type="checkbox"/> 1-B. Basic Camping Skills</p> <p><input type="checkbox"/> 1-C. Intro. to Archery</p> <p><input type="checkbox"/> 1-D. Field Dressing Big Game</p> <p><input type="checkbox"/> 1-E. Outdoor Skills & Survival</p> <p><input type="checkbox"/> 1-F. Become a Packable Gourmet</p> <p><input type="checkbox"/> 1-G. Intro. to ATVs</p> <p><input type="checkbox"/> 1-H. Intro. to Fly-tying</p> <p><input type="checkbox"/> 1-I. Intro. to Freshwater Fishing</p> <p><input type="checkbox"/> 1-J. Intro. to Hiking</p> <p><input type="checkbox"/> 1-K. Wilderness First Aid</p> <p><input type="checkbox"/> 1-L. Intro. to Rifle</p> <p><input type="checkbox"/> 1-M. EcoTouring Squam Lake</p> | <p>SESSION 2</p> <p><input type="checkbox"/> 2-A. Basic Map & Compass</p> <p><input type="checkbox"/> 2-B. Intro. to Shotgun</p> <p><input type="checkbox"/> 2-C. Handling Handguns</p> <p><input type="checkbox"/> 2-D. Outdoor Cooking</p> <p><input type="checkbox"/> 2-E. Intro. to Kayaking</p> <p><input type="checkbox"/> 2-F. Outdoor Skills & Survival</p> <p><input type="checkbox"/> 2-G. Intro. to Archery</p> <p><input type="checkbox"/> 2-H. Intro. to Canoeing</p> <p><input type="checkbox"/> 2-I. Fly-Fishing from A-Z (All Day)</p> <p><input type="checkbox"/> 2-J. Field Dressing Fish, Small Game</p> <p><input type="checkbox"/> 2-K. Exploring Wildlife Habitats</p> <p><input type="checkbox"/> 2-L. Fishing on Golden Pond</p> | <p>SESSION 3</p> <p><input type="checkbox"/> 3-A. Nature Photography in the Field</p> <p><input type="checkbox"/> 3-B. Basic Map & Compass</p> <p><input type="checkbox"/> 3-C. Intro. to Kayaking</p> <p><input type="checkbox"/> 3-D. Intro. to Canoeing</p> <p><input type="checkbox"/> 3-E. Intro. to Shotgun</p> <p><input type="checkbox"/> 3-F. Handling Handguns</p> <p><input type="checkbox"/> 3-G. Intro. to Hunting</p> <p><input type="checkbox"/> 3-H. Intermediate Archery</p> <p><input type="checkbox"/> 3-I. Exploring Wildlife Habitats</p> <p><input type="checkbox"/> 3-J. Intro. to Freshwater Fishing</p> <p><input type="checkbox"/> 3-K. Backyard Wildlife Habitat</p> <p><input type="checkbox"/> 3-L. Intro. to Kayak Fishing (Session 3&4)</p> | <p>SESSION 4</p> <p><input type="checkbox"/> 4-A. What Grows Here?</p> <p><input type="checkbox"/> 4-B. Wilderness Backpacking</p> <p><input type="checkbox"/> 4-C. Beautiful Bugs</p> <p><input type="checkbox"/> 4-D. Intro. to Bowhunting</p> <p><input type="checkbox"/> 4-E. Mountain Biking</p> <p><input type="checkbox"/> 4-F. Fly-Fishing on the Water</p> <p><input type="checkbox"/> 4-G. Fishing on Golden Pond</p> <p><input type="checkbox"/> 4-H. Intro. to Muzzleloader</p> <p><input type="checkbox"/> 4-I. Nature Photography in Field</p> <p><input type="checkbox"/> 4-J. Navigating in the Outdoors</p> <p><input type="checkbox"/> 4-K. Furbearers Forever</p> <p><input type="checkbox"/> 4-L. Sharing Nature with Children</p> |
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ROOMMATE PREFERENCE: (list up to 3) _____

FEE: \$330. Includes instruction in all sessions, program materials, use of demonstration equipment, all meals and lodging. **FEE DUE WITH REGISTRATION – RESERVE YOUR SPACE EARLY.**

PLEASE INDICATE METHOD OF PAYMENT:

- Check** – Total Amount: \$ _____ Payable to: N.H. Wildlife Trust (one check per registration)
- Visa** **MasterCard** Exp. date: ____/____/____ Signature _____
- Credit Card # _____ Total Amount: \$ _____

I would like to donate:

\$25.00

\$50.00

other \$ _____

to the NH BOW SCHOLARSHIP FUND.

I would like my name included on the sponsorship list.

I would like to remain anonymous.

SCHOLARSHIP APPLICANTS: Enclose \$30.00 application fee and a completed Scholarship Application Form along with this Registration Form.

REMIT PAYMENT ALONG WITH REGISTRATION FORM AND MAIL TO:
 BOW, c/o N.H. Fish and Game, 11 Hazen Drive, Concord, NH 03301 Attn: Tina Davenport

OFFICE USE ONLY

Registration # _____

Amt. encl. \$ _____

Check # _____

NO REGISTRATIONS WILL BE ACCEPTED BY TELEPHONE, FAX OR EMAIL

Enrollment is limited. Register in June to reserve your space!

IMPORTANT BOW REGISTRATION INFORMATION

CANCELLATION DEADLINE: If you cancel by August 13, 2010, you will receive a full refund. *Registrants who do not cancel by August 13, 2010, will be assessed the full program fee.* If you cannot attend, you may send a substitute in your place. Please advise us by August 13.

SCHOLARSHIPS: Several full (\$300) scholarships are available. Preference will be given to first-time participants who are single parents, students or members of fixed/low income households. To apply for a scholarship, call 603-271-3212 and request an application form or go to www.nhbow.com to download one. Send the application along with a \$30 deposit. You will be notified upon acceptance. If you do not qualify, your deposit will be refunded in full. If you are applying for a scholarship, please attach your scholarship application to your registration form.

LODGING: Rockywold/Deephaven Camps provide rustic cabin-style accommodations, with 1-2 persons to a room. Linens, ice and wood for the fireplace will be provided. All facilities have showers or baths and flush toilets. All meals are served buffet-style in the Rockywold Dining Room. To view the camp, visit: www.rdcsquam.com.

CONFIRMATION: Upon being registered, you will be sent a written confirmation that you have been accepted to the program, along with an information packet. If the program is full, your name will be put on a waiting list until the middle of August. If you do not receive a written confirmation, you have not been accepted to attend.

REGISTRATION: Registered participants must check-in on Friday, September 10, 2010, between 8 a.m. and 10:30 a.m. You will have time to enjoy the continental breakfast, park your vehicle in your assigned parking lot (where it will stay for the entire weekend), and settle into your cabin before the weekend's activities begin at 11:30 a.m. You will be walking to courses, meals and your cabin throughout the weekend, so please dress appropriately.

RAFFLE: During the weekend you will have the opportunity to purchase raffle tickets for items such as hunting, fishing and camping equipment, outdoor clothing and gift certificates. Raffle tickets are \$1 each or \$20 for 25. All items will be on display. Credit cards and checks accepted.

BOW MERCHANDISE: Long and short-sleeve t-shirts, embroidered fleece vests, pullovers and caps will be available for purchase throughout the weekend. Credit cards and checks accepted.

NOTE: Participants should understand that photographs and/or filming may occur during the sessions and may be used in future support of the program.

DIRECTIONS TO ROCKYWOLD/DEEPHAVEN CAMPS: RDC is approximately 1 hour from Concord, N.H. – follow I-93 north to Exit 24 in Ashland. Take US Route 3 and 25 east (4.2 miles) to Holderness. Take a Left on NH Route 113. Travel northeast (5 miles) to “Rockywold-Deephaven Camps” sign on the right, which is Pinehurst Road. Follow Pinehurst Road for less than 1 mile and take a right at the main entrance. Watch for bright pink BOW signs starting at Rte.113.

FALL BOW WEEKEND is held annually, the weekend after Labor Day, at Rockywold/Deephaven Camps on Squam Lake in Holderness.

WINTER BOW is a one-day event, held in February at the Owl Brook Hunter Education Center in Holderness.

BEYOND BOW EVENTS, such as the Kayak Fishing Weekend (Sept. 24-26, 2010) or other special events, are scheduled throughout the year – check our website for the latest information.



Sponsored by
New Hampshire Fish and Game Department and
New Hampshire Wildlife Federation



For more information, visit: www.nhbow.com or call (603) 271-3212

BECOMING AN OUTDOORS-WOMAN

Medical History Questionnaire

All Information is Confidential

Name _____ Date of Birth _____

Physician _____ Phone # _____

Emergency Contact Name _____ Phone# _____

QUESTIONS:

Please check any of the following medical conditions that apply to you:

- Yes No Are you allergic to any medication (aspirin, penicillin, etc.)? List _____
- Yes No Do you take any medication critical to your health? List _____
- Yes No Have you ever been told by a doctor that you have epilepsy? When _____
- Yes No Have you had recent surgical operations, accidents or injuries? When/What? _____
- Yes No Have you been “knocked out” unconscious, had a concussion or head injury? When? _____
- Yes No Are you pregnant? _____

Do you wear: glasses? or contact lenses?

Date of last tetanus immunization: _____

Please check any of the following medical conditions you have had within the last five years:

- Hay fever or allergies. (Especially to bees, ants, etc.) If yes, please list _____
If yes, bring your own Epi-Pen. We don't provide them.
- Heart Disease Diabetes Fainting spells
- Asthma Seizures High blood pressure

Do you have any medical training?

- Doctor Nurse Emergency Medical Technician Other _____

Is there anything else about your health you would like us to know in case of an emergency? _____

Signature _____ Date _____

PLEASE RETURN THIS QUESTIONNAIRE WITH YOUR REGISTRATION FORM.