



**MANAGED HUNT  
PARTICIPANT INFORMATION FORM  
AND PRE-SCREENING QUESTIONNAIRE**

**2024**

**NEW HUNTER**

Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_ Suffix: \_\_\_\_

Address: \_\_\_\_\_

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

**Mailing Address, if different from above:**

Address: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*(this is our primary way to contact you - please print legibly)*

Emergency Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to You: \_\_\_\_\_

Please list any medical conditions that you would like us to be made aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*DATA REQUIRED BY THE PRIVACY ACT OF 1974 (5 U.S.C. 552a): Authority: 5 U.S.C. Section 301  
Principle Purpose: To provide home address, telephone number and birthdate to hunting and fishing authorities.  
Routine Uses: Information may be disclosed to local, state, and federal hunting and fishing authorities.  
Disclosure: Voluntary. If information is not provided, individuals may be deprived of hunting and fishing privileges.*



**STRIVING FOR SUSTAINABILITY IN OUR PARKLANDS**

NEW HUNTER

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Suffix: \_\_\_\_\_

1. How many deer have you harvested? \_\_\_\_\_ and field dressed? \_\_\_\_\_
2. How many years have you hunted deer? \_\_\_\_\_ with what firearms/bows? \_\_\_\_\_  
\_\_\_\_\_
3. How many deer have you harvested with each of the above listed weapon types? \_\_\_\_\_  
\_\_\_\_\_
4. Where and when did you receive your Hunter Safety Card? \_\_\_\_\_
5. Our Managed Hunts are held on weekday mornings and we are planning on having 18 hunts this season. How many days would you be able to hunt if space was available? \_\_\_\_\_
6. The State allows our participants to harvest an unlimited number of antlerless deer. How many antlerless deer are you willing to harvest per day? \_\_\_\_\_ and per season? \_\_\_\_\_
7. Have you ever been convicted of and/or plead guilty to DNR or a game law violation(s)? \_\_\_\_\_  
If yes, When? Where? What was the violation(s)? Please explain: \_\_\_\_\_  
\_\_\_\_\_
8. Have you ever been convicted of and/or plead guilty to a crime(s) (other than general traffic violations)? \_\_\_\_\_  
If yes, When? Where? What was the crime? Please explain: \_\_\_\_\_  
\_\_\_\_\_
9. This program requires participants to abide by State hunter safety orange requirements. How much hunter safety orange are you required to wear while hunting in Maryland? \_\_\_\_\_
10. What types of ammunition are permitted while participating in this hunting program? \_\_\_\_\_
11. Our hunters are required to hunt from a tree stand. What are the 2 most important pieces of equipment when hunting from a tree stand? \_\_\_\_\_, \_\_\_\_\_
12. What is the maximum distance allowed for shooting deer in this managed hunting program? \_\_\_\_\_
13. While hunting, assuming that all equipment is in exemplary working condition, what are the two most important things to be sure of prior to squeezing the trigger?
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
14. Please describe the value of wildlife management on County Parklands: \_\_\_\_\_  
\_\_\_\_\_

