Youth, Apprentice & Family Program Volunteer Application



1-Day Training Program - Volunteer

To volunteer for the 1-Day program, please fill out this application and mail it to the following address:

KYSCI 211 Willoughby Court Louisville, KY 40245

	For more inform	nation or to regist	er online visit kentuckianasci.com
Name:			
Age:	Birthdate:		
Street Address:			
City:		State:	Zip:
Phone:		Email:	
In case of emergency call:			Phone:
If under 21 please s	ubmit parent/le	gal guardian info	rmation:
Name:			Age:
Street Address:			
City:	S	State:	Zip:
Phone:		Email:	
SCI Chapter Memb	er? Yes	No	
Does applicant need	d hunter educatio	on safety card (ora	nge card)?
Yes No			
	API	PLICATION MUS	ST BE RECEIVED NO LATER

THAN 2 WEEKS PRIOR TO PROGRAM START DATE