Elk Preference Point Program

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First Name | M.I. | Last Name

Social Security No. | Date of Birth

Mailing Address

Weight | Eyes | Hair | Height | Sex

City | State | Zip code

2007 2008 2009 2010
Year I intend to hunt (Please Circle)

Phone | E-Mail

Each Participant must fill out a separate form, please make additional photo copies.

Method Payment: ☐ Check ☐ Credit Card ☐ Visa ☐ MasterCard ☐ American Express

Signature

Credit Card Number | Expires

Name as it appears on Credit Card

Cut along line

Be sure to make copies for others in your group.