WBH Volunteer Information Form

Name_____ WBH Member # _____

Street_____ City _____

State_____ ZIP_____ County _____

Phone Home (_____)_____ Cell (_____)_____ Work (_____) _____

E-mail | | | | | | | | | | | | | | | | | | | | | | | | | |

List Local Archery/Sportsman's Club Memberships:

_____

_____

_____

_____

List Other Statewide Organizations:

_____

_____

_____

Relevant certifications: ___ Hunter Safety Instructor ___ Bow Safety Instructor ___ NASP

___ Other: _____

I would like to volunteer my services for:

___ Office Projects/Special Mailings

___ Local Archery-related Events

___ New Lisbon Broadhead Shoot

___ Madison Deer/Turkey Expo

___ Convention

___ Conservation Congress Spring Hearings

___ Green Bay Deer Classic

___ Other: _____

Mail form to **WBH PO Box 240 Clintonville WI 54929** or Fax form to 715-823-1385.

Feel free to copy this form for family members and friends!