



## WHITPAIN TOWNSHIP DEER MANAGEMENT APPLICATION 2024/2025

### PERSONAL INFORMATION

Name: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Vehicle make/model: \_\_\_\_\_

License plate #: \_\_\_\_\_ Vehicle color: \_\_\_\_\_

### HUNTING INFORMATION

PA Game Commission CID #: \_\_\_\_\_

Number of antlerless tags possessed: \_\_\_\_\_

Have you ever been convicted of a game law violation: \_\_\_\_\_

If you answered yes above, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Bow used:      Crossbow \_\_\_\_\_      Compound \_\_\_\_\_      Traditional \_\_\_\_\_

How many years have you archery hunted: \_\_\_\_\_

Can you consistently place 3 arrows in a 6" circle shot from a distance of 20 yards? \_\_\_\_\_

### AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted to the Whitpain Township Deer Management Program, any false statements, omissions, or other misrepresentations made on this application will result in my immediate dismissal. I hereby agree to adhere to all PA state Game Laws as well as all policies put in place by Whitpain Township for their Deer Management Program.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_