

Buck Daze Mail in Application

Print it, complete it and mail in with Payment to: BuckDaze C/O SGA , 14105 SR 200, Damascus, GA 39841

BuckDaze Hunter \$500 ___ Ages 13,14&15 \$250 ___ BuckDaze Sponsor \$700 ___ BuckDaze
Benefactor \$1150 ___

Name: _____

Address: _____

Phone: (h) _____ (w) _____

If bringing a non-paying hunter aged 12 or under?

Name: _____ Age: _____

Hunting Experience: ___ First Time ___ Novice ___ Experienced

Type of Hunt Desired (Check all that apply): ___ Archery ___ Firearms ___ Trophy Buck ___ Doe ___
Mixed Bag

Hunts near lodging are more convenient. Where will you be staying?

What Group of Hunters Should Be Together? Names:

I, _____ do hereby save harmless and indemnify the Parent-Teacher Organization of Southwest Georgia Academy, the participating landowners and hunting clubs, and the cooperators from any legal action resulting from any damages, injuries, or death resulting from participating in SGA's Buck Daze Deer Hunts. I have read and understand the included information about Buck Daze. Enclosed is my payment in full for Buck Daze. I agree to act in a sportsmanlike manner as a guest of the PTO of SGA and its participating hosts. It is understood that SGA does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational policies, admission policies, and its athletic and other school administered programs.

Signature: _____

Date: _____