

STUDENT CLASS NOTIFICATION AND SUPPLY REQUEST

COUNTY _____ MASTER INSTRUCTOR _____

INSTRUCTOR _____ CERTIFICATION NUMBER _____

ADDRESS - for UPS shipping
(No PO Box Numbers)

TYPE OF CLASS **BOAT** **HUNT** **FIELD** **SNOW** **TRAP**

REGISTRATION INFO

LOCATION OF CLASS (with address)

CLASS DATE (S)

TIME
TIME
TIME

MATERIALS REQUESTED:

of Manuals _____
of Registration Cards _____
of Wallet Certifications _____
of Rosters _____

of Tests _____
of Test Keys _____
of Lapel Pins _____
of State Regulations _____

VIDEO REQUESTED (VHS or DVD) _____

ADDITIONAL MATERIALS REQUESTED _____

ARE HANDOUT/PAMPHLETS WANTED IN YOUR ORDER? YES NO

COMMENTS

DATE EMAILED TO IDNR OFFICE

(at least 45 days prior to class date) _____