

2010 APPLICATION FOR DULUTH CITY BOWHUNT, Part 2

(Please print clearly and sign all 3 locations. Mail signed application, along with your check payable to the "City of Duluth")

1. Personal Information:

Last Name First Name Middle Initial

Email (important): Date of Birth: / /

Personal ID # from on-line Application:

1. I understand that the following policies are mandatory for my participation in Duluth managed hunts. I must:

- Show proof of passing an accepted Bowhunter Education Safety class.
Pass a shooting proficiency test sponsored by the Arrowhead Bowhunters Alliance (ABA).
Harvest and tag an antler-less deer within my Designated Hunting Area (DHA) before attempting to harvest a buck.
Hunt with a portable treestand no less than 12 feet above ground, unless permitted to do so otherwise, e.g. groundblinds.
Personally attend an Orientation, dates to be announced at www.bowhuntersalliance.org .
Bowhunt under the supervision of my assigned Hunt Coordinator.
Sign a Waiver of Liability and Ethics Pledge. (See below)
Read, understand and fully comply all rules as described in the official ABA Rules Book.
Accept all ABA decisions as final.
Respect additional restrictions that may apply.

Signed: Date:

2. Release Agreement (Waiver of Liability):

- By my signature, I hereby release private landowners, ABA and their agents, and other sponsoring municipalities, agencies and organizations for all liability or claim I may have arising out of my participation in any special management hunts.
Further, I explicitly waive all rights to sue the ABA, and any Board member or individual acting on behalf of the ABA in their performance of tasks related to the management of this hunt.
Additionally, I agree to fully indemnify and hold harmless the ABA for any litigation resulting from my participation in this hunt or matters relating to my participation in the hunt.
I have read the ABA Rules Manual (posted on-line) and will comply with its contents. I am willingly and freely accepting these terms and conditions and I understand that I can be removed from this hunt with recourse by the ABA Board.
I certify that I am of legal age and have the ability and desire to join these activities at my own risk and decision.

Signed: Date:

3. Bowhunter's Ethics Pledge: I, the undersigned, do hereby pledge and promise that I will:

- Obey all applicable State and City laws and all rules and regulations governing my hunt.
Fully cooperate with everyone involved in the spirit of the hunt's rules and regulations.
Respect private property rights of all landowners involved.
Respect the hunting areas and strategies of other participants of the hunt.
Respect the vegetation of the lands I cross and hunt on.
Report all suspicious activity to ABA (and enforcement agencies, if directed).
Wear a safety belt at all times while hunting from a treestand.
Wear my identification tag while hunting and scouting.

I understand participation in this program is not a right but a privilege. I understand that my failure to live up to the responsibilities of this pledge may be grounds for my dismissal.

Signed: Date:

Send this completed Part 2 of the Application, and \$25.00 check or money order made payable to the City of Duluth to: Arrowhead Bowhunters Alliance, 23 West Central Entrance (PMB # 346), Duluth, MN 55811

Please keep your printed on-line application for your own personal records, just in case something happens with the ABA's website. Only mail in this Part 2 sheet, and ONLY mail it to the ABA address above, AND NOT TO THE CITY OF DULUTH!