

Island Safaris

Registration Form Status Sheet

P.O. Box 428
Springdale, NL
A0J 1T0

Group Leader _____ Ph.# _____

Number in Group _____

Hunter Name: First _____ Middle Initial _____ Last _____

Civic/Postal Address

City _____ State/Province _____

Zip/Postal Code _____

Phone Number: Home _____ Work _____

Date of Birth Yr. _____ Month _____ Day _____

Height _____ Weight _____

Hair Color _____ Eye Color _____

Do you have any physical restrictions/special dietary needs? Yes _____ No _____

If so, please explain:

Are you driving to Newfoundland? _____ Flying? _____ Arrival Date/Time: _____

Hunting Request Dates: _____

Moose _____ Caribou _____ Bear _____ Small Game _____ Fishing _____

Guide 1x1 _____ 2x1 _____

Rate Quoted _____ Deposit Sent _____ Date: _____

Request Remarks

Hunter Signature _____ *Cheques Payable to: Island Aviation LTD.*