

JAKES® Event Reporting Form

Chapter Name: _____

Chapter Contact: _____ **Phone #:** _____

Contact Address: _____

City: _____ **State:** _____ **Zip code:** _____

Date of Event: _____ **Event Location:** _____

Please check one: First time event Repeat Event

Did your event include Xtreme JAKES (ages 13-17) activities? Yes No

Did you partner with the US Forest Service (i.e., Smokey Bear appearance or learning station presented by Forest Service staff)? Yes No

Did your event take place on US Forest Service land? Yes No

Did you partner with a school or did your event take place on school grounds/during school hours? Yes No

Did you partner with a state agency (Dept. of natural resources, fish and wildlife agency)? Yes No

Total number of children attending: _____ #

Sex: _____ # of Males _____ # of Females

Ages: _____ # of 0-8 _____ # of 9-12 _____ # 13-17

Total number of adults: _____ # (include parents, volunteers, chapter leaders)

Memberships:

I am not enclosing memberships.

I am enclosing JAKES® memberships that have been paid through an NWTF Hunting Heritage Banquet.

Number of JAKES® memberships enclosed _____.

I am enclosing memberships and a check for the total amount due.

Check Amount \$ _____ **Check number** _____

Total number of JAKES® memberships: _____ x \$7 = \$ _____

Total number of Xtreme JAKES® memberships: _____ x \$10 = \$ _____

Total number of Adult memberships: _____ x \$30 = \$ _____

Other memberships: _____ x \$ _____ = \$ _____

NWTF merchandise purchased for event: _____ = \$ _____

Mail to:

NWTF

Attention: Mandy Harling

P.O. Box 530

Edgefield, SC 29824

FAX: (803) 637-6643

