



SAFARI CLUB INTERNATIONAL

Northeast Wisconsin Chapter

HUNT DONATION FORM

www.scihunterexpo.com

PLEASE PRINT

OUTFITTER INFORMATION

Outfitter / Company Name: _____

Contact Person's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Cell: _____

Email: _____

website: _____

Facebook Page: _____

HUNT / TRIP INFORMATION

Number of Hunters Donation Covers: _____ Non-Hunters: _____

Hunters per Guide:

1 to 1: _____ 2 to 1: _____ Assisted: _____ Non-Guided: _____ Other: _____

Hunt Location: _____

Hunting Season: _____ Number of days: _____

Year this hunt/trip can be taken? _____

Can this hunt/trip be taken in an alternative year? Yes: _____ No: _____

If yes, what year? _____

If trophies are taken early in this hunt, will hunter(s) be required to leave camp early? Yes: _____ No: _____

Game to be
hunted:

Trophy Fees
Included:

Trophy Fees
not Included:

Can this hunt/trip be upgraded? Yes: _____ No: _____

what game/activities
can be added to this
hunt/trip?

Cost of upgrade: _____

Cost of Additional Hunters (each): _____

Cost of Non-Hunters (each): _____

Transport during hunt: Foot: _____ Vehicle: _____ Horse: _____ Boat: _____

Air: _____ ATV: _____ Other: _____

Is Trophy prep included? Yes: _____ No: _____

Is transport of trophies to shipper included? Yes: _____ No: _____

If no, approximate cost: _____

LODGING DURING HUNT

Lodge: _____ Motel/Hotel: _____ Cabin: _____ Tent: _____ Other: _____
Are meals and non-alcoholic beverages included? Yes: _____ No: _____
Are alcoholic beverages included? Yes: _____ No: _____
Is laundry done on this hunt/trip? Yes: _____ No: _____

FEES / LICENSES

License or Permit fees required? Yes: _____ No: _____
If yes, License or Permit cost: _____
Application deadline if any: _____ Success%: _____
Is there any Permit or License lottery? Yes: _____ No: _____
Are any CITES Permits required? Yes: _____ No: _____

WEAPONS

Weapon to be used: _____
Alternative Weapon: _____
Ammunition needed: _____
Restrictions: _____
weapon permits required: Yes _____ No _____
Does donor provide permits: Yes _____ No _____

PRE and POST TRAVEL

Hunt/trip arrival and departure point: _____
Any hunt transportation charges not included in this donation? Yes: _____ No: _____
Type of transportation not included: _____
Cost of this transportation: _____
Accommodations not included before or after hunt: _____

DONATION VALUE

Donation Value: _____ 100% Donation: _____ Other: _____
Special Notes: _____

Signature: _____ Date: _____

Print a copy for your records.
Mail or email a completed and signed copy to address below.
Include three current brochures and digital pictures for
buyer and promotional use.

Contact:
Marty LaCourt at 920-604-0047
E-mail: shredd2012er@gmail.com

Mail To:
NE Wisconsin Chapter SCI
c/o Marty LaCourt
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