## HUNTING CONTRACT WITH KISSLINGER OUTFITTING

KISSLINGER OUTFITTING Box 928 La Loche, Saskatchewan SOM 1G0 E-mail: <u>bearkiss@kisslingeroutfitting.com</u> Phone: (780) 913-7223 Fax: (306) 822-2264

l, \_\_\_\_\_

(Please Print) would like to Book a hunt with your

company for the period of

\_\_\_\_\_. I agree to be bound by all

terms and conditions contained in the following:

- RESERVATIONS AND CANCELLATIONS: To confirm a reservation for a black bear hunt a \$1,000.00 deposit is required. The balance of the hunt cost is due prior to arrival at camp in guaranteed funds. Deposits are non-refundable; however they may be transferred to another year of hunt date subject to mutual agreement. Hunts will not be considered booked until deposit is received.
- 2. WOUNDED BEAR POLICY: If blood is found and the bear isn't killed or found, hunt is completed. A \$1,500 fee must be paid for hunter to continue hunting on remaining days. The Outfitter has final say on any discrepancies.
- 3. LAST DAY POLICY: Due to a high concentration of bears, Kisslinger Outfitting will not tolerate a sow killed on the last day and the hunter will pay a \$1,000 fee should this happen.
- 4. GENERAL LIABILITY AND INSURANCE: Clients on any hunts must understand and accept that there are inherent risks in this type of activity. Accordingly, you will assume the risk of injury as your responsibility. Hunters must bring a safety harness that must be worn at stand location. Our camp will not supply this piece of equipment.
- 5. GENERAL INFORMATION: Names, photographs, videos, etc of clients may be taken and used without further authorization for promotional purposes.

I	(Please Sign) have read and understand all o				
the above terms and	d conditions, and	d acknowledge and a	agree tha	at I, and my he	eirs and executors, will be
bound by all such te	rms and condition	ons and have signed	my nam	e on	, 201
to confirm this.					
NAME:					(Please Print)
ADDRESS:					
		STATE			ZIP CODE:
FAX # ()					
DATE OF BIRTH:					
	Month	Day		Year	
DRIVER'S LICENSE #				L SECURITY #	!
HEIGHT: WEIGHT:					
ARE YOU HUNTING					
RIFLE CLOTHING REC	QUIRED: YES o	r NO (Please circle	) Orange	e hat – Full jac	ket in red, white or orange
DO YOU HAVE ANY I	MEDICAL CONDI	TIONS OR ALLERGIE	S THAT V	VE SHOULD K	NOW ABOUT?
(Please Explain)					
PLEASE LIST ANY EM	IERGENCY CONT	ACT NAMES AND N	UMBERS	:	

ARE YOU FLYING INTO EDMONTON or SASKATOON or FT. MCMURRAY (please circle) ARRIVAL DATE: \_\_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_\_