

## Angler R3 Instructor Workshop Registration Camp Upham Woods – Wisconsin Dells, WI

**Notice:** Personal information collected will be used for administrative purposes and may be provided to requesters to the extent allowed by Wisconsin's Open Records Law (ss. 19.31-19.39, Wis. Stats.).

Dates and Times: **Saturday, November 2, 2019, 9 A.M. – 4 P.M.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City & Zip: \_\_\_\_\_

Phone, **including area code:** \_\_\_\_\_

E-mail: \_\_\_\_\_

DNR Customer Identification Number: \_\_\_\_\_

***This is the 9-digit number on your fishing or hunting license. You'll need it to get the required background check to become an instructor.***

Dietary Restrictions: \_\_\_\_\_

We hope to do a little fishing; let us know if you need gear.

\_\_\_\_\_ I have my own gear. \_\_\_\_\_ I'd like to borrow gear.

**To help us tailor this workshop, please tell us how you are involved in educational fishing programs.**

\_\_\_\_\_ Adult Fishing Instruction Program Coordinator – Organization: \_\_\_\_\_

\_\_\_\_\_ Fishing Club Member – Ages of Clinic Participants: \_\_\_\_\_

\_\_\_\_\_ Teacher, Grade & Subjects: \_\_\_\_\_

\_\_\_\_\_ After School Provider or Youth Development, Age of children in your program: \_\_\_\_\_

\_\_\_\_\_ Other, Describe: \_\_\_\_\_

Please print, complete and mail before October 28, 2019. Remember to include your \$15.00 Workshop Commitment Deposit, refundable upon arrival at the workshop. Your commitment deposit becomes a donation to the Angler Education Program if you fail to attend without calling to cancel at least one day before the workshop. Please make the check payable to *Department of Natural Resources* and write *Angler Education* on the memo line.

**Deadline:** Please print, complete and mail so that it arrives on or before **October 28, 2019.**

**Mailing Address:**

**Andrew Krismer, LE/8**  
**Department of Natural Resources**  
**P.O. Box 7921**  
**Madison, WI 53707-7921**

**Questions?**

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