

LOST CREEK OUTFITTERS

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We have put together a survey for you to fill out and return to us ASAP. This information will assist us in providing the best quality hunt that we can for you. We thank you in advance for taking the time to complete this questionnaire.

NAME: _____

EMAIL ADDRESS: _____

FAX #: _____

IN CASE OF EMERGENCY CONTACT: NAME _____ PHONE # _____

- 1) Do you have a preference to hunt out of tree stands or ground blinds?

- 2) What weapon do you plan to use for your deer hunt?

- 3) What distance are you comfortable shooting?

- 4) What is your Height _____ Weight _____ and Age _____? (for tree stand capability)

- 5) Are you in good physical health – able to climb tree stands, or walk through the bush? How far are you comfortable walking to a stand?

- 6) For Angella’s reference for food preparation, do you have any food allergies or special dietary needs?

- 7) Briefly describe your past hunting experience. What type of guided hunts have you been on in the past?