



Application for Iowa City Deer Management Bow Hunt Program

CITY OF IOWA CITY

Non Legible Applications Will Be Returned

Hunter's First, Middle & Last Name

Email Address

Street Address, City, State & Zip Code

Cell Phone Number

Alternate Phone Number

1st Emergency Contact Name & Number

2nd Emergency Contact Name & Number

Hunter's Iowa Driver's License Number

Hunter's Iowa DNR Customer ID #

Vehicle to be used during hunt:

Year

Make

Model

Color

License Plate #

Have you ever been arrested or charged with a crime (other than traffic violation)? Yes No

If yes, list below the arrest/charge date (if not sure, give approximate date), charging agency, charge(s) and disposition. If you were convicted of a felony please notate next to the disposition.

Have you ever had contact with the Iowa Department of Natural Resources which resulted in an enforcement action taking place? Yes No

If yes, list below the incident date (if not sure, give approximate date), county of where incident took place, violation/reason for enforcement action and the disposition.

_____ My initials are an acknowledgement of my understanding and permission for the Iowa City Police Department to conduct a criminal history background check. I understand any false information or non-disclosures will result in immediate removal of the program.

As an Applicant to the Bow Hunt Program, your initials indicate you agree to the following:

- _____ Include a copy of my Iowa DNR Hunting License.
- _____ To be at least 18 years old or older on the day of the hunt.
- _____ To take all shots at least six (6) feet up in a manufactured elevated stand which has an approved safety harness; each hunter is encouraged to use a TMA or ASTM certified harness.
- _____ To NOT shoot within 150 feet (25 yards) or less of a home or any building, NOT shoot back into the distance separation; except (do NOT check unless it is applicable).
 - _____ (1) when hunting own property while adhering to distance requirement from adjoining property owner structure;
 - _____ (2) other property owners(s) waives distance requirement in written statement filed with the City;
- _____ To NOT position or use an elevated stand within 150 feet (25 yards) of any recreation trail, road, park, school, or right-of-way; and NO shot shall be taken that may cross or enter into the same.
- _____ To shoot downward and no further than 75 feet (25 yards) from an elevated stand, and attempt to retrieve every arrow.
- _____ To case all bows while traveling to and from the site to the hunting stand.
- _____ To follow DNR Hunting guideline, except when the City regulations are more restrictive than State regulations.
- _____ To follow all the requirements set forth in Iowa City Bow Hunt Program "Application Process and Instructions; Rules; and Other Information."
- _____ To follow H.U.S.H. (Help Us Stop Hunger) drop off guidelines. I understand dropping off deer not properly field dressed, iced or spoiled can be cause for my removal from the program.
- _____ I acknowledge the Urban Hunt coordinator will have constant communication with all H.U.S.H. participating packing plants and give my consent for any infractions to be reported. I understand any infraction can be cause for my removal from the program and or being removed/suspended from the buck incentive award program.
- _____ I understand participating in this program is a "PRIVILEGE AND NOT A RIGHT". I also understand and acknowledge I can be removed from the program at any time.

Hunter's Signature

Date Signed

Voluntary Authorization Release

Please read each statement carefully. Place your initials next to each statement to indicate you have read and understand its content.

_____By signing this voluntary authorization, the hunter on behalf of his or her own self and their heirs, assigns and legal representatives agree to release and hold harmless and indemnify the City of Iowa City, its officers, agents, representatives, employees, and other participating parties to this special hunt, from any law suit or action that is made or brought against the City for all activities associated with the Iowa City Deer Management Bow Hunt Program.

_____While the City does not require you to provide proof of insurance, you are encouraged to consult your insurance agent regarding liability insurance and/or umbrella insurance that may provide you with coverage for your potential liability to the City or others while you engage in bow hunting.

_____I have read and understand all the requirements set forth in “Application Process and Instructions; Rules; and Additional Information.”

My voluntary signature confirms I have reviewed the above statements and have a clear understanding of their content, and in doing so I release and hold harmless and indemnify the City of Iowa City, its officers, agents, representatives, employees, and other participating parties to this special hunt, from any law suit or action that is made or brought against the City for all activities associated with the Iowa City Deer Management Bow Hunt Program.

Hunter Signature

Date

Property(s) Requested to be Hunted (limit to four per hunter):

Property #

Property Owner

Property Manager

Name of Property Owner/Property Manager

Email Address

Address of Property to be hunted

Cell Phone Number

Alternate Phone Number

Will this property require a Waiver of Separation? Yes No

Will the property be shared by another approved Iowa City Urban Bow Hunter? Yes No

If yes, name of hunter: _____

NOTE: Merely sharing property on paper to increase your property locations will not be accepted and could be cause for removal.

Hunters: Please advise the property owner/manager that the Iowa City Police Department or DNR may make contact with them by telephone or/and in person to inspect the property to be hunted, verify accuracy of information, or to address any questions/concerns.

Waiver of Separation Requirement: If property requires more than three waivers, the property cannot be hunted. Please advise all grantors of the waiver that the Iowa City Police Department and/or DNR may make contact with them by telephone or/and in person to inspect location, verify accuracy of information or to address any questions/concerns.

Waiver Information # 1: Property Owner(s) Name to Grant Waiver

Address of Property

Cell Phone Number

Alternate Phone Number

Waiver Information # 2: Property Owner(s) Name to Grant Waiver

Address of Property

Cell Phone Number

Alternate Phone Number

Waiver Information # 3: Property Owner(s) Name to Grant Waiver

Address of Property

Cell Phone Number

Alternate Phone Number