

# Newfoundland and Labrador Trapper Education Program

## PARTICIPANT INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

DATE OF BIRTH: YEAR \_\_\_\_\_ MONTH \_\_\_\_\_ DAY \_\_\_\_\_

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

EYE COLOUR: \_\_\_\_\_ HAIR COLOUR: \_\_\_\_\_

MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_ PHONE: \_\_\_\_\_

NL DRIVER LICENCE NUMBER OR PHOTO

IDENTIFICATION CARD NUMBER: \_\_\_\_\_

COMMENTS (and e-mail address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[nltrappersassoc@gmail.com](mailto:nltrappersassoc@gmail.com)

VISIT OUR WEBSITE: [www.nltrappers.com](http://www.nltrappers.com)