



CLIENT INFORMATION

Client's Name _____

First

MI

Last

Address _____

City _____ State _____ Zip Code _____

Home Number _____ Mobile Number _____

Email address _____

Date of Birth _____ Colorado Resident Since (if applicable) _____

Height _____ Weight _____ Hair Color _____ Eye Color _____

Driver's License State and Number **(Include a copy)** _____

State

Number

Hunter Safety State and ID Number **(Include a copy)** _____

State

Number

Colorado Customer Identification Number _____

Social Security Number **(this is required if you have not hunted in Colorado)** _____

Hunting Group _____

Non-Hunting Guest(s) _____

EMERGENCY CONTACT INFORMATION

Primary Contact Name _____

Relationship _____

Home Number _____ Mobile Number _____

Secondary Contact Name _____

Relationship _____

Home Number _____ Mobile Number _____

TRAVEL ARRANGEMENTS

*ERO will provide transportation from local airports in
Hayden, Steamboat Springs and Craig Colorado.*

Airline Travel Information

Flight Information _____
Flight Number Day Time Airport

Driving Information

Date and Time of Expected Arrival _____

PHYSICAL & HEALTH INFORMATION

List all food and medicine allergies:

List any medications that you will be taking:

Do you require any special diet? Yes / No If Yes, please list.

Physical and/or health limitations, please list:
