



International YHEC *EXPRESS* Registration

For Returning Volunteers Only

This form should only be used if information previously provided to the NRA Hunter Services Department has not changed.

Name: _____

What was the last year you volunteered at International YHEC? _____

Preferred event assignment: _____

LODGING/TRAVEL INFORMATION

I will make my own lodging reservations. (The volunteer will be responsible for payment.)

Please reserve lodging for me. (NRA Hunter Services will be responsible for payment.)

Day of Arrival: _____ Day of Departure: _____

Roommate Preference: _____

Other Considerations: _____

In case of emergency, I may be reached at: _____.

(Phone Number Where You Can Be Reached During the Event)

Please return your completed registration to:

NRA Hunter Services Department – IYHEC

11250 Waples Mill Road

Fairfax, VA 22030

VOLUNTEER INFORMATION	
Full Name:	DOB:
Has your address, phone number, or email address changed? If so, please provide the new contact information here:	
CLOTHING SIZES	
<i>Adult Sizes. Circle all that apply.</i>	
T-Shirt:	M L XL XXL XXXL
Sweatshirt:	M L XL XXL XXXL
Jacket:	M L XL XXL XXXL
Vest:	M L XL XXL XXXL

MEDICAL HISTORY	
Health Insurance Carrier:	Policy ID #:
Physician:	Physician's Phone:
Special Considerations: (Prescriptions, Medications, Allergies, etc.)	

EMERGENCY CONTACT	
Name:	Relationship to Volunteer:
Daytime Phone:	Evening Phone:
Email:	Fax:

I, _____, give permission for emergency medical treatment in case of illness or accident. I also agree to the Liability/Medical Release, Volunteer Code of Conduct, and Model Release which I have signed in previous years.

Signature of Volunteer

Date