

**CITY OF OSKALOOSA
DEER HUNTER REGISTRATION**

Date: _____ Name: _____

Phone No. _____ Address: _____

City: _____ State: _____

SS#: _____ IA hunting license # _____

Applicant's Signature: _____

Issued by: _____

Attach proof of proficiency test to this form.

**CITY OF OSKALOOSA
DEER HUNTER REGISTRATION**

Date: _____ Name: _____

Phone No. _____ Address: _____

City: _____ State: _____

SS#: _____ IA hunting license # _____

Applicant's Signature: _____

Issued by: _____

Attach proof of proficiency test to this form.