

# Outfitters 4 Hope

## Child application for outdoor adventure!



### Eligibility ANY CHILD WHO MEETS THE FOLLOWING BASIC CRITERIA IS ELIGIBLE FOR CONSIDERATION

- Must be 10-17 yrs old (*younger children may be accepted on a case to case basis following application review*)
- Must be a legal US citizen
- Must meet at least one of the following 'status' criteria:
  - Medical status: must contain a diagnosis of a potentially life threatening or terminal illness in their past or present medical history. We define this as "Any progressive, degenerative or malignant disease/condition, that necessitates treatment before the age of 18 in an effort to interrupt or abate a condition that will threaten or significantly shorten life expectancy".
  - Hero status: must be the child of a fallen hero. We define fallen hero as any "Military veterans, firefighters, police officers or EMS providers who have become disabled (acquiring permanent physical impairment that substantially limits one or more major life activities requiring the assistance of another person or mechanical device for physical mobility) or whom have paid the ultimate sacrifice in the line of duty".
- Parent or legal guardian must be available to travel with child to fulfill dream hunt
- Must not have previously had a fulfilled hunt or fishing dream by a sponsoring non profit organization
- Must have a heart for adventure and share the dream of hunting and fishing in the great outdoors!

IF YOUR CHILD MEETS THESE BASIC ELIGIBILITY REQUIREMENTS, PLEASE COMPLETE THE FORM BELOW

### **Basic information about child applicant** (APPLICATION MUST BE FULLY COMPLETED FOR CONSIDERATION)

Full legal name: \_\_\_\_\_  
First Middle (optional) Last

Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female Last 4 digits of Social Security # \_\_\_\_\_

(For tag application state requirement): Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

### **Information about child applicants Parent(s)/Legal Guardian(s)**

Parent/guardian full legal name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  home  cell  office

Phone number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  home  cell  office

Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Relation to child: \_\_\_\_\_

(documentation may be required if relation differs from parent)

If fallen hero status applies which parent or guardian has served?  Mother  Father  Both  other: \_\_\_\_\_

Under which branch have they served? \_\_\_\_\_

Briefly describe the qualification circumstance: \_\_\_\_\_

*Be Joyful in hope, patient in affliction, faithful in prayer Romans 12:12*



# Outfitters 4 Hope

## Information about child applicants Parent(s)/Legal Guardian(s)

Parent/guardian full legal name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
First Middle (optional) Last

same as previous City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  home  cell  office

Phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  home  cell  office

Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Relation to child: \_\_\_\_\_

*(documentation may be required if relation differs from parent)*

If fallen hero status applies which parent or guardian has served?  Mother  Father  Both  other: \_\_\_\_\_

Under which branch have they served? \_\_\_\_\_

### Additional information about child applicant

Under which 'status' criteria does child applicant fall?  Medical  Hero  Both

Medical diagnosis of potentially life threatening or terminal illness: \_\_\_\_\_ Approximate date of diagnosis: \_\_\_\_\_

Will child and one (or both) of listed parents/legal guardians be ready to travel to within the next 1-12 months?  yes  no

If no how soon would you anticipate child being ready to travel? \_\_\_\_\_

If child applicant is considered for an Outfitters 4 Hope dream hunt, is parent/legal guardian willing to sign a Release of Medical Information?  yes  no

If child is accepted for an Outfitters 4 Hope dream hunt, is parent/legal guardian willing to sign a Waiver of Liability?  yes  no If child is accepted for Outfitters 4 Hope dream hunt is parent or legal guardian willing to provide more information about child's physical

capabilities?  yes  no

How did child learn about Outfitters 4 Hope? \_\_\_\_\_

Has child ever participated in hunter education before?  yes  no

If yes, in what State? \_\_\_\_\_ Approximate date: \_\_\_\_\_

If no, is child willing to participate in hunters education if necessary prior to fulfilling dream hunt?  yes  no

Has child ever hunted before?  yes  no

Has child ever solely (or with assistance) fired a hunting rifle?  yes  no

On a scale from 1-10 (1 being least excited and 10 being most excited!) how excited is the child applicant to potentially hunt or fish with O4H?

1  2  3  4  5  6  7  8  9  10

*Outfitters 4 Hope specializes in fulfilling dreams within the State of Idaho. Currently we are best trained and equipped to handle big game hunting adventures. However, it is the goal of the organization to fulfill any child's hunting or fishing dreams regardless of what it is. In order to accomplish this we partner with multiple other non-profits with similar missions that might be better suited for your child's dream. If your child dreams of something other than what Outfitters for Hope provides please tell us and we will assist as best we can:*

\_\_\_\_\_

**If you have any questions about this application or the organization please contact us!**

**(Completed applications can be submitted via mail or email)**

**Outfitters 4 Hope**

**1116 Royalty Ave  
Emmett ID 83617**

**outfitters4hope@gmail.com**

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*Romans 12:12*