



# Little Lakes Memories LLC

## Application for Disabled Hunt

1. Veterans Name or Child's Name:

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2. Wife/Parent Name:

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3. Birthdate: \_\_\_\_\_ Age: (Optional) \_\_\_\_\_

4. DD 214 (for Veterans only):

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5. Is the candidate restricted from possessing or using fire arms, or weapons for any reason:

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6. Child's Disability: (Optional)

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7. Why are you applying for a hunt?

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8. Have you done a hunt in the past or is this your first?

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9. Does the candidate have hunting land to hunt on? Yes \_\_\_\_\_ No \_\_\_\_\_

10. Would he/she be in any need of assistance during the hunt:

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Mail Application to: Dick Busha,  
Little Lakes Memories LLC  
W5097 Winkelman Ave.,  
Irma, WI 54442