

Solebury Township Deer Management Program

Property Enrollment Form

Name _____

Street Address _____

Mailing Address _____

City _____ Zip Code _____

Phone Number _____ Email Address _____

*If you currently have hunter(s) on your property please enroll with 'Private Hunter(s)' option and list their information.

*If you do not have hunter(s) enroll with 'Program Provided Hunter(s)' option and hunter(s) will be provided to you.

Enrollment Options: ☐ **Private Hunter(s)** ☐ **Program Provided Hunter(s)**

**** All hunters enrolled in the program will be expected to communicate harvest information with the program manager. ****

Private Hunter Information **(required):**

Name	Address	Email	Phone	PA Hunting License (CID) #

☐ **Archery** ☐ **Firearms** ☐ **Both** as approved methods of hunting on your property within legal safety zone restrictions (i.e., an archery hunter must be at least 50 yards from a building unless waived by the Property Owner, 150 yards applies for firearms).

☐ **Check the box if willing to participate in the **Red Tag Program**, Feb-Sept. Properties with agriculture or adjacent qualify.**

The regular hunting season takes place from mid-September through the end of January during archery and firearms seasons.

Signature _____ Date _____

**** Please return form to P.O. Box 139, Solebury, PA 18963 or email a copy to nathan.e.spence@usda.gov ****