



Date Submitted _____

Date Needed _____

Aquatic Education Supplies/Equipment Checkout

Event Name _____

Number of Participants _____

Name _____

Address _____

City _____ Zip _____ County _____

Home # _____ Cell # _____

Email _____

Affiliation (e.g. community, organization, school) _____

Circle One: KDWPT Employee KDWPT Certified Angling Instructor Other
 Circle One: Fishing Clinic/Derby School Class/Program Advanced A.E. Instructor Class Outreach

Fishing Equipment	Number Requested	Information	Number Requested	Prizes/Giveaways	Number Requested
Cane Poles	_____	Angler Pocket Guides	_____	Tackle Boxes	_____
Rod/Reel Combos	_____	Fish ID Guides	_____	Fish Cards (sets)	_____
Hooks/Weights/Bobbers	_____	Fishing Regulations	_____	Other: _____ _____ _____ _____	_____
Pliers	_____	Fishing Atlas	_____		_____
Backyard Bass Set	_____	ANS Booklets	_____		_____
Instructor Kit	_____	Other:	_____		_____
Other:	_____		_____		_____
	_____		_____		_____
	_____		_____		_____

I have received the listed items in good condition. I agree to return the fishing equipment in reasonable condition along with any unused informational materials and prizes within 10 business days

Sign and Date _____

Please consider supplies are limited and KDWPT may not be able to fulfill all requested items.

Fishing equipment was returned in reasonable condition:

KDWPT Representative Sign and Date _____