

**Kansas Wildlife Habitat Education Program Invitational
REGISTRATION FORM**
Kansas State University Research and Extension

TEAM NAME _____

TEAM MEMBERS (Please list and give complete address and age)

1. Name _____
Mailing Address _____
Age _____ Date of birth _____
2. Name _____
Mailing Address _____
Age _____ Date of birth _____
3. Name _____
Mailing Address _____
Age _____ Date of birth _____
4. Name _____
Mailing Address _____
Age _____ Date of birth _____

COACH AND ASSISTANT COACHES

1. Name _____ Phone _____
Mailing Address _____
Email Address _____
2. Name _____ Phone _____
Mailing Address _____
Email Address _____
3. Name _____ Phone _____
Mailing Address _____
Email Address _____

Please return to: Drew Ricketts, Wildlife Specialist
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