

UPSTATE MOBILITY IMPAIRED DEER HUNTS APPLICATION - 2024
PIEDMONT PRIVATE AREAS
CHEROKEE, SPARTANBURG, & UNION COS. / LAURENS, & NEWBERRY COS.

These special hunts are for severely mobility impaired individuals only. The eligibility requirements are very specific and include those who are permanently confined to a wheelchair, permanently require some type of mechanical aid such as a walker, braces, cane, etc. to assist them in walking, or have had a single or double leg amputation. If you do not fully meet one of these three criteria, please do not apply. Applicants may apply for one or both hunt dates. Hunt sites are assigned by random selection. Answer all questions completely and legibly. Remember to **COMPLETE AND SIGN LIABILITY WAIVER** and return with application.

Name _____ Telephone No. _____ Email _____

Address _____ City, State, Zip _____

Describe Mobility Impairment in Detail _____

Are You a Veteran? ___ Yes ___ No Is Mobility Impairment Military Service Related? ___ Yes ___ No

Check Each That Applies to Your Physical Capabilities and Mobility Impairment:

_____ Permanent Confinement to Wheelchair - How Long? _____

_____ Permanent Use of Mechanical Aid to Assist in Walking - List Type of Aid (s) _____

How Long Has This Aid Been Utilized On a Full-Time (Permanent) Basis? _____

___ Amputee (Check): ___ Right Leg ___ Left Leg ___ Both Legs Utilize Prosthesis? ___ Yes ___ No

List Any Special Needs for Assistance (Heavy Power Wheelchairs and etc.) _____

Do You Have a SC Disability License? ___ Yes ___ No Hunting License Waiver Needed? ___ Yes ___ No

Overnight Lodging Needed? ___ Yes ___ No Bringing Someone to Assist You? ___ Yes ___ No

Overnight lodging is not guaranteed by indicating yes. Hunters should assume responsibility for their own lodging unless contacted by their host and offered lodging.

Indicate First and Second Preference of Hunt Dates and Counties

_____ Oct. 25-26 in Cherokee, Spartanburg & Union Cos. _____ Nov. 1-2 in Laurens & Newberry Cos.

Applications are available at the DNR website at www.dnr.sc.gov/hunting/mobilityhunt. **MAKE SURE TO COMPETE AND RETURN LIABILITY WAIVER FORM (ON BACK OF THIS PAGE) with your application. All completed applications must be received at the Union DNR office by 5:00 pm, Tuesday, September 3, 2024.**

RETURN TO: SCDNR–MOBILITY IMPAIRED DEER HUNTS
124 WILDLIFE DRIVE
UNION, S.C. 29379
OR FAX (864) 427-8460

LIABILITY WAIVER FORM

I understand that there are risks and dangers inherent in participating in hunting activities. I also understand that in order to be allowed to participate, I must give up my rights to hold liable the State of South Carolina and its agency the South Carolina Department of Natural Resources and all cooperating hosts, sponsors and landowners who accommodate special DNR hunts for any injury or damage which I may suffer while participating in a Department of Natural Resources draw hunt.

Knowing this, and in consideration of being permitted to participate, I hereby voluntarily release the State of South Carolina and its agency the South Carolina Department of Natural Resources and cooperating hosts, sponsors and landowners from any liability resulting from or arising out of my participation in the draw hunt.

I understand and agree that I am releasing not only the entities set forth in the two paragraphs above, but also the officers, agents, and employees of those entities.

I understand and agree that this release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present, or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation. This release constitutes a complete release, discharge, and waiver of any and all actions or causes of action against the State of South Carolina and its agency the South Carolina Department of Natural Resources, and its officers, agents, or employees and cooperating hosts, sponsors and landowners.

I understand and agree that this release applies to personal injury, property damage, or wrongful death, which I may suffer, even if caused by the acts or omissions of others.

I understand and agree that by signing this release, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while participating in the draw hunt.

I understand that and agree that this release will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children and guardian ad litem for said children.

I understand and agree that by signing this release, I am to release, indemnify and hold the State of South Carolina and its agency the South Carolina Department of Natural Resources, and its officers, agents, or employees and cooperating hosts, sponsors and landowners harmless from any and all liability or costs, including attorney fees, associated with or arising from my participation in the draw hunt.

Applicant Signature: _____ **Date:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Emergency Contact: _____ **Telephone:** _____

Parent or Guardian Signature: _____ **Date:** _____

(If applicant is under the age of 18)