

**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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