

REDSTONE ARSENAL DIRECTORATE OF MORALE, WELFARE & RECREATION
CONTRACTOR HUNTING FORM**SECTION ONE - EMPLOYEE**

NAME: _____ DATE OF BIRTH: / / _____

ORGANIZATION: _____

BUILDING/ADDRESS: _____

EMPLOYEE'S OCCUPATION: _____

HOME PHONE: () WORK PHONE: () _____

I CERTIFY UNDER PENALTY OF THE LAW THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT. I UNDERSTAND THAT IF I HAVE FURNISHED FALSE INFORMATION ON THIS FORM, I AM SUBJECT TO BE CHARGED WITH CRIMINAL TRESPASSING OR HUNTING WITHOUT PERMISSION, TO HAVE MY PRIVILEGES PERMANENTLY REVOKED AND TO BE BARRED FROM ENTERING THE ARSENAL. I ALSO UNDERSTAND THAT ANY FALSE STATEMENT IN THIS CERTIFICATION KNOWINGLY MADE BY ME MAY SUBJECT ME TO CRIMINAL PROSECUTION UNDER TITLE 18, UNITED STATES CODE SECTION 1001, WHICH CARRIES A MAXIMUM PUNISHMENT OF \$10,000, OR IMPRISONMENT FOR 5 YEARS, OR BOTH. I CERTIFY BY SIGNING THIS FORM THAT I HAVE READ FULLY AND UNDERSTAND THIS CERTIFICATION FORM AND REDSTONE ARSENAL REGULATION 200-3, AND THAT I MEET THE HUNTING ELIGIBILITY REQUIREMENT STIPULATED IN THIS CERTIFICATION FORM.

SIGNATURE OF EMPLOYEE: _____ DATE: _____

SECTION TWO - EMPLOYER

NAME OF SUPERVISOR: _____ WORK PHONE: () _____

I HAVE REVIEWED THE INFORMATION PROVIDED BY MY EMPLOYEE AND CERTIFY IT TO BE TRUE AND CORRECT AND THAT THE ABOVE MENTIONED EMPLOYEE **IS EMPLOYED FULL TIME ON REDSTONE ARSENAL** AND MEETS THE HUNTING ELIGIBILITY REQUIREMENTS OF THIS CERTIFICATION. I FURTHER UNDERSTAND THAT ANY CHANGES IN MY EMPLOYEE'S STATUS WILL BE REPORTED TO OUTDOOR RECREATION, 876-4868 IMMEDIATELY.

CONTRACT RENEWAL DATE or EMPLOYEE TERMINATION DATE: _____.

SIGNATURE OF SUPERVISOR: _____ DATE: _____

SECTION THREE - CONTRACTING OFFICER

CONTRACT #: _____ ORGANIZATION: _____

I CERTIFY THAT THE ABOVE MENTIONED EMPLOYEE'S ORGANIZATION HAS A CURRENT CONTRACT ON REDSTONE ARSENAL AND THAT THE EMPLOYEE MEETS THE HUNTING ELIGIBILITY REQUIREMENTS STIPULATED IN THIS CERTIFICATION FORM.

BUILDING #: _____ WORK PHONE: () _____

CONTRACTING OFFICER: _____

(PLEASE PRINT)

CONTRACTING OFFICER: _____

(SIGNATURE)