



NE One Box Pheasant Hunt: Nov. 5-7th, 2026

Past Shooter Pre-registration **Deadline: Oct. 1st** ☎ 308-872-5047

Return By

Oct. 1st

Fax: 308-872-2191 Attn: Elaine

Email: ebebayer@gmail.com

Mail: P.O. Box 294

Broken Bow, Ne 68822

Name: _____

Phone: _____ Cell: _____

Mailing Address: _____

Bringing a Guest? Yes No

City: _____

Hotel: _____

State: _____ Zip: _____

Past Shooter Dog Handler? Yes, # _____ No

Email address: _____

HUNTING PREFERENCE Hunt Benefactor Package (non-hunting)

I wish to hunt with: _____

*You and listed person must BOTH request to hunt with each other.

PAST SHOOTER DUES

Please select one of the following membership options:

	Selection	Price
A	One Year Membership	\$30.00
	Lifetime Membership	\$250.00
	Already a Lifetime Member?	\$0.00

HUNTING FEE (Meal tickets included) Please select one of the following.

B	Past Shooter / Past Shooter Dog Handler	\$535.00
	Past Shooter Team Guide	\$215.00
	New Team Guide / New Team Dog Handler/New Team Scorekeeper	\$160.00
	Competitive Past Shooter (in addition to Past Shooter fee)	\$140.00

BENEFACTOR PACKAGE (NON-HUNTING)

C	Includes Past Shooter Fee & Past Shooter Raffle (Does not include dues) Includes Friday Lunch • Friday Banquet • Saturday Breakfast • Saturday Banquet	\$280.00
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GUEST MEALS *Meal prices subject to change at registration.

	# Needed	Cost per person
D	Guest Banquet Package (Friday & Saturday Evening \$50/night or \$100/both)	x \$50.00
	Friday Lunch	x 12.00
	Saturday Breakfast	x 8.00

HABITAT DONATION

E	Gold	\$250+
	Silver	\$100-249
	Bronze	\$50-99

THURSDAY MORNING HUNT (OPTIONAL)

f	Arrive early for the Lynn Berggren Memorial Released Bird Hunt.	FREE!	<input type="checkbox"/> Yes! Count me in!
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DONATING AN AUCTION/SILENT AUCTION ITEM?

<input type="checkbox"/> Yes <input type="checkbox"/> No	Value of Item
Item #1:	\$
Item #2:	\$

PAYMENT DUE AT REGISTRATION

DO NOT SEND PAYMENT FOR HUNT.

Upon signing, applicant agrees to the fees listed above. The NE One Box Pheasant Hunt reserves the right to revise selections at registration.

Signature: _____

Date: _____