

Acoma Tribal Hunt Survey – 2017 Season

Name: _____ Phone Number: _____

Address: _____ Email: _____

It is **mandatory** for all permit holders to complete and return this survey. Failure to do so will render you ineligible for future hunts. Your response will provide valuable information for Acoma's Wildlife Management Program.

Return to:

Acoma Game and Fish Enterprise
P.O. Box 310
Acoma, NM 87034
Fax: 505-552-7449
Email: acomagameandfish@skycity.com

If you have any questions feel free to call us @ 505-552-9866.

****Please fill in all that apply****

Elk (Check one box only) **Archery** **Muzzleloader** **Rifle**

Permit # **Harvest?** **Date of Harvest** **Location of Harvest** **Sex of Harvest**

Length of Antler Points (example: 5x5): _____

Number, species and location of wounded but not recovered: _____

Species	Harvest? Y/N	Date of Harvest	Location of Harvest	Sex of Harvest	Weapon
Bear	_____	_____	_____	_____	_____
Mt. Lion	_____	_____	_____	_____	_____

Species	Harvest? Y/N	Date of Harvest	Location of Harvest	Sex of Harvest	Beard Length
Turkey	_____	_____	_____	_____	_____

How satisfied are you with your hunt? **1** **2** **3** **4** **5**

1 (did not meet my expectations)	3 (met my expectations)	5 (exceeded my expectations)
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Comments:

SURVEYS ARE DUE NO LATER THAN FEBRUARY 9, 2018.

Thank You,
Acoma Game and Fish