

CFTH Big Gator Shoot-out Measurement Form

Name of Registrant: _____

Registration Number: _____ Harvest Location: _____

Phone: () _____ ATL. # _____

Measurement Location: (Must be approved location)

Length: (measured from nose to end of tail laying flat over back) _____ Ft _____ Inches
(measured to nearest 1/8")

Girth: (measured at widest point) _____ Inches (measured to nearest 1/8")

Each form must include a photo taken at the time of measurement. It is the
Hunters responsibility to provide a camera.

Hunter Signature: _____ Date: _____

Measurer Name: _____ Date: _____

Measurer Signature: _____ Date: _____

By signing the form above you agree to submit to a voice stress analysis
(Lie Detector Test)

MAIL or Deliver To:

Central Florida Trophy Hunts,

1655 Alligator Lane, Cocoa, FL. 32926
321-632-8995