



Brainerd Chapter Minnesota Deer Hunters Association  
44<sup>th</sup> Annual Banquet  
**Friday, September 5, 2025**  
**The Brainerd Lakes Curling Club**  
5:00 Social Hour, 6:30 Dinner



**All registration forms must be received by Friday, August 29th.**

Banquet includes dinner, silent auction, games, and more!

ITEM	NO.	PRICE	TOTAL
<b>SINGLE ADULT MDHA MEMBERSHIP and DINNER</b>		<b>\$75.00</b>	
<b>FAMILY MDHA MEMBERSHIP</b> (Parents/Guardians, Children 17 & Under in Same Household) <b>and ONE ADULT DINNER</b>		<b>\$110.00</b>	
<b>LIFETIME MEMBER or ADULT GUEST DINNER</b> One guest per membership		<b>\$40.00</b>	
<b>FORKHORN MEMBERSHIP and DINNER</b>		<b>\$30.00</b>	
<b>FORKHORN DINNER</b> (use with family membership)		<b>\$25.00</b>	
<b>GENERAL RAFFLE TICKET - DOE PACKAGE</b> \$70.00 worth of General Raffle Tickets		<b>\$50.00</b>	
<b>GENERAL RAFFLE TICKET - BUCK PACKAGE</b> \$150 worth of General Raffle Tickets		<b>\$100.00</b>	
I can't attend but renew my ADULT membership		<b>\$35.00</b>	
I can't attend but renew my FORKHORN membership		<b>\$5.00</b>	

**NON-REFUNDABLE TOTAL:**

\$ \_\_\_\_\_

<b>Registration #1 Name:</b>			
Address:			
Phone Number:		Email:	
<b>Registration #2 Name:</b>			
Address:			
Phone Number:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

**SEND TO:**

**MDHA Brainerd Chapter**  
**PO Box 78**  
**Brainerd, MN 56401**

**Make checks payable to:**  
**Brainerd Chapter MDHA**

**Call with questions:**  
**Mike Patrick**  
**218-838-8855**

**brdmdha@gmail.com**

**PLEASE LIST ADDITIONAL NAMES & ADDRESSES ON BACK**

Name:			
Address:			
Phone:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

Name:			
Address:			
Phone:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

Name:			
Address:			
Phone:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

Name:			
Address:			
Phone:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

Name:			
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Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	

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Circle One:	Member	Guest	Forkhorn
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Name:			
Address:			
Phone:		Email:	
Circle One:	Member	Guest	Forkhorn
Forkhorn Birthday Month:		Year:	