DEER HARVEST REPORT FORM



Two ways to submit:

• Email: deermgt@mohonkpreserve.org

 Scan PDF or download Excel spreadsheet (Mohonk Preserve Deer Mgt. Program Webpage)

• Mail: Deer Management Program

Mohonk Preserve PO Box 715

New Paltz, NY 12562

HUNTER NAME:
MP PERMIT #:
HARVEST DATE:
SEX: □ Male □ Female (Antlerless)
AGE GROUP: Adult Young of Year EXACT AGE (if known):
ANTLER POINTS: ANTLER BEAM DIAMETER (mm):
WEIGHT (if known):Ibs
TAG USED: ☐ REG SEASON DEER ☐ BOW/MZ EITHER SEX ☐ BOW/MZ ANTLERLESS ☐ DMAP CARCASSS TAG ☐ DMP DEER TAG
DOC/TAG #:
HUNTING IMPLEMENT: VERTICAL BOW CROSSBOW SHOTGUN HANDGUN MUZZLELOADER
HARVEST ZONE: Mark on map approximately where deer was harvested Map on back of sheet.
NEW DMAP ISSUED: □ YES □ NO
If yes DOC#
CHECKED BY:

