



Natural Resources Office
107 Hwy 85 North
Niceville, FL 32578
(850) 882-4165 or 4166

Youth Lottery Hunt

FY25 Eglin AFB

Special Opportunity Hunt



Hunt Dates:
15 - 16 February 2025

Eligibility	<ul style="list-style-type: none"> Youth applicants between 10-15 YOA on the first day of the hunt are eligible to apply. Applications submitted by a supervising hunter with past or current NOVAA's will be reviewed for eligibility.
Applicants	<ul style="list-style-type: none"> Applicants must be <u>directly</u> supervised by a non-hunting adult 21 YOA or older. There may only be one supervising adult in the field with the youth hunter. <u>Your name may appear on only one application.</u> Any applicant whose name appears on multiple applications will be removed from the lottery.
Application Period 1 Sept. - 31 Dec. 2024	<ul style="list-style-type: none"> Application must be <u>mailed or returned in person</u> to the Natural Resources Office within the Application Period. The NRO is not responsible for applications lost in the mail. The NRO will not accept mailed applications arriving after the due date.
<u>DO NOT e-mail or fax</u>	<ul style="list-style-type: none"> Incomplete or illegible applications will not be entered in the lottery.
Drawing 09 Jan. 2025	<ul style="list-style-type: none"> A random drawing will select 50 youth applicants to participate in the 2-day hunt. Alternates will be drawn as replacements if a selected hunter cannot hunt.
Drawing Notification 10 Jan. 2025	<ul style="list-style-type: none"> Applicants can view hunters selected for the hunt by checking eglin.iSportsman.net under the Special Opportunity Hunts/Events heading, select the Youth Lottery Hunt from the drop-down menu. Selected Youth Hunters will be identified by the <u>supervising hunter's</u> information provided on their application: <ol style="list-style-type: none"> 1) First initial of first and last name 2) iSportsman Account Number (if you have one) 3) Last three digits of phone number 4) Youth Hunter's first name <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto; margin-right: auto;"> <p>Example: BM / 123456 / 145 / Terry</p> </div> <ul style="list-style-type: none"> Drawing results WILL NOT be available over the phone.
Confirm Acceptance by 17 Jan. 2025	<ul style="list-style-type: none"> Supervising adult not confirming Youth Hunter slot by COB on the established date will forfeit their slot to the first available alternate.
Cost of Hunt \$40.00 per hunter	<ul style="list-style-type: none"> Selected applicants can purchase their Sp. Opp. Hunt Permit during the week prior to the hunt. Selling or transferring permits is prohibited. Youth hunter must show proof of age (i.e. Birth Certificate, Florida ID card) at time of permit purchase.
Pre-Hunt Meeting 14 Feb. 2025	<ul style="list-style-type: none"> Pre-hunt meeting will be at Jackson Guard @ 4:00 p.m. CST. Please arrive 30 minutes early to allow time to purchase permit. <u>MANDATORY for every supervising hunter.</u> Youth hunters are strongly encouraged to attend. Meeting will cover the Special Opportunity rules, procedures, schedules, and answer any questions. All hunting rules and regulations for the State of Florida and Eglin AFB apply to this hunt.
Legal to Take	<ul style="list-style-type: none"> Antlered deer must have three points (≥ 1 inch in length) on a side or a main beam length of 10 inches or greater. <i>Note: Youth may harvest one antlered deer annually that does not meet the established Antler Point Restriction (APR) for that area. You may choose to utilize this exemption during this hunt if not already utilized.</i> Antlerless deer without antlers or antlers less than five inches in length (NO spotted fawns). Wild Hog and Coyote.
Bag Limits (per hunter)	<ul style="list-style-type: none"> Two antlered deer or one antlered and one antlerless. <u>Harvested deer count toward the FWC's 5 deer statewide annual limit per hunter.</u> FWC's deer harvest reporting requirements must be followed. No limit on wild hog or coyote.
Hunt Locations	<ul style="list-style-type: none"> A Jackson Guard escort is required when travelling to and from your hunt location. Hunters must stay at their assigned hunt location; safety protocol prohibits moving around without your guide.
Check Station Requirement	<ul style="list-style-type: none"> All harvested game must be checked at the Check Station. All hunters must check out with their Jackson Guard escort when leaving for the day.

**** BEFORE SUBMITTING THIS APPLICATION, READ THE GUIDELINES GOVERNING THIS HUNT ****



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Eglin AFB Special Opportunity Hunt 2024 - 25

Youth Lottery Hunt

**Application Due at Jackson Guard by COB
31 Dec. 2024**

Application Received at Jackson Guard on: _____

Please print neatly. If your information is illegible, we cannot enter you in the lottery.

_____		_____	
<i>iSportsman Permit #</i>			
Name: _____		Mailing Address: _____	
First	MI	Last	Suffix
		Street	
DOB: ____ / ____ / ____		Phone Number: ____ / ____	
MM	DD	YYYY	Area Code
		Phone Number	City
		State	Zip
<i>If selected for the hunt, we need to know of any special requirements at least two weeks prior to the hunt date.</i>		What Type of Vehicle will you be driving?	
		<input type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive <input type="checkbox"/> Car <input type="checkbox"/> Truck	
		How will youth be hunting?	
		<input type="checkbox"/> My Tree Stand/Climber <input type="checkbox"/> My Ground Blind If Available, I Will Need a: <input type="checkbox"/> Tree Stand <input type="checkbox"/> Ground Blind	
I have read the FY25 Youth Lottery Hunt Guidelines:			
_____		_____	
Signature		Date	

Youth Applicant(s)

Each applicant must be between 10 – 15 YOA on first day of hunt

_____ <i>iSportsman Permit #</i> DOB: ____ / ____ / ____ MM DD YYYY Name: _____ First MI Last Suffix	_____ <i>iSportsman Permit #</i> DOB: ____ / ____ / ____ MM DD YYYY Name: _____ First MI Last Suffix
_____ <i>iSportsman Permit #</i> DOB: ____ / ____ / ____ MM DD YYYY Name: _____ First MI Last Suffix	_____ <i>iSportsman Permit #</i> DOB: ____ / ____ / ____ MM DD YYYY Name: _____ First MI Last Suffix

Return by U.S. Postal Service or Bring to Jackson Guard

DO NOT fax or E-mail