|  |  |  |
| --- | --- | --- |
| **SAN CARLOS APACHE TRIBE**  **Recreation and Wildlife Department**  P.O. Box 97  San Carlos, Arizona 85550  (928) 475-2343 ext.234  FAX (928) 475-2701  Email recnwildlife18@gmail.com | | |
| |  |  |  | | --- | --- | --- | | Terry Rambler  Tribal Chairman | recnwild | Tim Stevens  Director | |  |  | |

NON-MEMBER HUNTING APPLCATION

FULL NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_

DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HEIGT\_\_\_\_\_\_\_\_ WEIGHT\_\_\_\_\_\_\_\_\_ SEX\_\_\_\_

PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I AM APPLYING FOR THE FOLLOWING SAN CARLOS HUNTS:

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1ST ELK ARCHERY |  | NOV. COUES DEER A, B, C, D |
|  | 2ND ELK ARCHERY |  | 1ST JAN. COUES DEER A, B, C, D |
|  | ELK ANTLERLESS |  | 2ND JAN. COUES DEER A, B, C, D |
|  | ELK RIFLE |  | 3RD JAN COUES DEER A,B C, D |
|  | MANAGEMENT CULL |  | JAN. R-100/C |
|  | ANTELOPE |  |  |

|  |  |
| --- | --- |
|  | $5.00 HABITAT STAMP |
|  | $15.00 TAG |

**- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -**

TYPE OF PAYMENT

CHECK CREDIT/DEBIT CARD MONEY ORDER

CREDIT/DEBIT CARD # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EXP. DATE: \_\_\_\_\_\_\_\_\_\_\_ CVS: \_\_\_\_\_\_\_\_\_\_\_

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -**

OFFICE USE ONLY.

PLEASE SIGN WHEN PROCESSED

SIGN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_