



Tolowa Dee-ni' Nation Harvest License Application

License Type: Harvest License Minor Harvester Harvest Assistance

Section 1: Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

DOB: _____ Phone: () _____

Hair Color: _____ Eye Color: _____ Height: _____

Are you Tribal? YES NO

Are you an enrolled citizen of TDN? YES NO If yes, what is your Tribal ID#? _____

Are you an enrolled member of another Tribe? YES NO If yes, in what Tribe? _____

Section 2: Harvesting Details: What are you harvesting?

Fish Invertebrates Plants Birds * Small Game * Big Game *

If you checked a box with an * have you taken a Hunter's Safety Course? YES NO
If yes, please provide certification number: _____
Please indicate which draws you wish to participate in: _____

Section 3: For Minor Harvesters ONLY

If applying for a Minor Harvester License, accompanying eligible harvester must complete the following:

What is your relation to the minor? Parent Guardian Extended Family Custodian

Full Name: _____ Phone: () _____

Address: _____

Harvest Lic #: _____

I, _____, hereby take responsibility for ensuring _____ harvests
Eligible Harvester *Minor Applicant*
pursuant to the Title and I will be present when harvesting under the provisions of this Title.
Signature: _____ Date: _____

Section 4: For Harvest Assistance ONLY

If applying for a Harvest Assistance License, your designee must fill out the following:

Designee Name _____ Phone: (____) _____
Address: _____ Harvest Lic #: _____

I, _____, hereby take responsibility to assist _____ in the exercise of
Designee *Applicant*
their harvesting rights under the provisions of this Title.
Signature: _____ Date: _____

Section 5: Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Section 6: Official Use Only

Approved by: _____ Date: _____ Lic. # _____