Print Form

Montana Fish, Wildlife & Parks

GEOCACHE IDENTIFICATION FORM AND PERMIT

MONTANA STATE PARKS

RESPONSIBLE PARTY'S contact information:
Name: _____
Address: _____
City, State and Zip Code: _____
Telephone: (home) _____ (work) _____
E-mail address & User name: _____

The RESPONSIBLE PARTY desires to place a geocache at the following location(s) in _____ State Park/FAS

Type of Cache: ☐ Traditional ☐ Multi-cache ☐ Letterbox ☐ Event/CITO ☐ Mystery ☐ Virtual ☐ Other _____

CACHE NAME (required): _____

CACHE LOCATION: (use the final site if multi-cache, mystery cache or offset cache):
_____

LATITUDE: _____
LONGITUDE: _____ COUNTY: _____
CACHE CONTAINER DESCRIPTION: (size, color, container description)
_____

GEOCACHE WEBSITE ADDRESS(ES): _____

ADDITIONAL TERMS & CONDITIONS (if needed):
_____
_____

IF MULTI-CACHE, LIST ADDITIONAL SITE(S):
_____
_____

I _____ hereby agree to abide by the terms of Montana State Parks geocaching policy and park rules associated with the above named cache.

Applicant Signature _____ Date _____

Park Manager Approval _____ Cache expires _____

(List additional multi-caches on back page)