



2019 MONTANA DISABLED ANTELOPE APPLICATION

RETURN TO: MONTANA FISH, WILDLIFE & PARKS LICENSING BUREAU - Disabled Antelope 1420 E 6th AVE PO BOX 8009 HELENA, MT 59604

Applications must be postmarked by the US Postal Service on or before June 1, 2019

MANDATORY INFORMATION Please Print Clearly

Form with fields for DATE OF BIRTH, NAME, MAILING ADDRESS, PHYSICAL ADDRESS, Gender, Height, Weight, Hair Color, Eye Color, Hunter Education Requirement, Social Security #, Occupation, Department Use Only, Signature of Applicant, and FWP mailing list preference.

RESIDENT AND NONRESIDENT CONSERVATION AND BASE HUNTING FEE REQUIREMENTS

The 2015 legislature passed HB 140 that states, to be eligible to apply for a hunting license or permit, a person must first obtain a base hunting license as a prerequisite. You must also purchase a Conservation License prior to applying to purchase any hunting, fishing or trapping license. MCA 87-2-201

- Fee requirements for 2019 resident and nonresident conservation and base hunting licenses.

MANDATORY FOR RESIDENT ONLY

I hereby declare that I have been a legal resident of the State of Montana for at least 180 consecutive days: _____ Years _____ Months immediately prior to making application for this license or that I qualify for the 30 day military exception, or Montana Job Corp. Camp exception (MCA 87-2-102). I declare all statements on this form are true and correct and the undersigned hereby agrees to the use of the information on this form for the purpose of verifying residency according to MCA 87-2-102.

HUNTERS AGAINST HUNGER DONATION These donations fund a program that processes donated wild game and distributes the meat to those in need. Would you like to donate? YES NO If yes, in the amount of \$ _____

Form for NONRESIDENTS USE THIS SECTION including ANTELOPE DISTRICT CHOICE, FEES table, and application amount fields.

Form for RESIDENTS USE THIS SECTION including ANTELOPE DISTRICT CHOICE, FEES table, and application amount fields.

** Beginning in 2003 both residents and nonresidents have the opportunity to accumulate bonus points for Antelope licenses. This system also applies to the Antelope licenses for the disabled; however, historically your odds of drawing this license were about 98% and you may choose not to pay this fee. For more information see the 2019 Deer, Elk and Antelope regulations or call (406) 444-2950.

Applicants Name: _____

Date of Birth _____

Hunters who qualify for this license MUST BE accompanied by another person to assist with field dressing and/or recovery of a wounded game animal when hunting big game. MCA 87-2-803(4)(c).

Section 2 — Must be completed by one of the following licensed Health Care Providers; Medical Doctor (MD), Doctor of Osteopathy (DO), Advanced Practice Registered Nurse (APRN), Physician Assistant (PA) or Chiropractor (DC).

Health Care Provider MUST check one or more of the following PERMANENT eligibility criteria.

Patient Name _____

- Nonambulatory** means permanently, physically reliant on a wheelchair or a similar compensatory appliance or device for mobility.
- Substantially Impaired Mobility** means virtual inability to move on foot due to a permanent physical reliance on crutches, canes, prosthetic appliances or similar compensatory appliances or devices.
- Documented Genetic Condition** means a diagnosis derived from genetic testing and confirmed by a licensed physician. Licensed physician means a person who holds a degree as a doctor of medicine or doctor of osteopathy and who has a valid license to practice medicine or osteopathic medicine in this state. **If this box is checked only an MD or DO signature will be accepted below.**

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PRINT — Health Care Provider Name

Health Care Provider — Office Phone Number

PRINT — Health Care Provider Address

License # of Health Care Provider

Health Care Provider Signature

Date