2018 Controlled Hunt Application CHANGE REQUEST

Fax this application to 503-947-6113 OR 503-947-6117.
We are unable to accept telephone orders.
CHANGE REQUEST MUST BE RECEIVED BY JUNE 1 IN ORDER TO BE ACCEPTED.

PHOTOCOPIES OF THIS PAGE *MAY* BE USED.

QUESTIONS? CALL 503-947-6101

Change form #_____
Issue Date _____
Initials _____
Verification
Date _____
Initial_____
DEPARTMENT USE ONLY

MAIL TO:ODFW Controlled Hunts: 4034 Fairview Industrial Dr SE Salem OR 97302

LAST NAME (Please Print) FIRST MI

MAILING ADDRESS

CITY STATE ZIPCODE

DAYTIME PHONE NUMBER EMAIL ADDRESS

Hunter/Angler ID Number

Date of Birth (MM-DD-YYYY)

You may make changes to a controlled hunt application that has been purchased through June 1. The first change to an existing controlled hunt series application is free. <u>For any additional changes to that series application there will be a fee of $25.00.</u>

<u>THIS IS WHAT MY APPLICATION SHOULD LOOK LIKE:</u>

<u>What hunt series</u> _____

Party Leader # _____

1st Choice _____

2nd Choice_____

3rd Choice_____

4th Choice_____

5th Choice_____

LOP Choice_____

Requested Correction:

Please mark the appropriate line that applies.

___I would like to be Party Leader

___I would like to be a Party Member:

List the Party Leader's Name _____

Hunter/ Angler ID # _____

___As the party leader, I would like to dissolve my whole party to Individual applications

___Change my application to reflect a new Party Leader:

List the Party Leader's Name :_____

Hunter/ Angler ID # _____

Please remove me as a Party Member to Individual

I would like to change from a Party Member to Party Leader

___Add my LOP choice to my application

PAYMENT METHOD: (PLEASE DO NOT SEND CASH)
Check/Money Order to ODFW enclosed or MasterCard / Visa / Discover ↓ CVC #_____

Credit Card number_____Exp. Date_____

This is how I want my application to go through the drawing.

Applicants Signature_____ Date_____