

Oregon Department of Fish and Wildlife

Duplicate Hunter Safety Card Request

Fee \$10 for those 18 and above

Please print legibly - use name as it would have appeared on your original certification card.							
First Name	Middle Name		ime	Last Name			
Full legal name if different the			ginal card	*note- this name will be printed on your duplicate card and will be changed in your ODFW profile			
Date of Birth (MM/DD/YYYY) /ag	e Daytime C	Contact Pl	one Number	ODFW ID #			
Mailing Address			City	City		Zip	
Permanent Residence Address (if different than above)			City	City		Zip	
City of original class (if known)			class (approxi	ss (approximately)		Instructor name (if known)	
Name of person requesting duplicate card (if n			applicant)	licant)		Relationship to applicant	
**Special Instructions:							
PAYMENT INFORMATION							
Please note there is a \$10 fee for all duplicate hunter education cards for all applicants 18 or older. PAYMENT OPTIONS 1. Complete this form and send it with a check or money order to: ODFW, attn.: Hunter Ed, 4034 Fairview Industrial Dr SE, Salem, Or, 97302 2. Complete this form and fax it to 503-947-6009. Form must include the required credit card information (see below) 3. Complete this form and take it to any ODFW office with cash, check, credit card or \$10 money order 4. DO NOT email this form since it contains your credit card information							
☐ Visa ☐ MasterCard Name as it appears on card:							
Card Number:			Expiration	ration Date (MM/YY): plus security code			
Signature of Cardholder:							
Please allow up to three weeks to process applicants will be mailed a new certification documents and may be listed as ODFW He	on card if their re unter/Angler ID	ecords can #.	be located. OD				
For ODFW use only Initials Date Certification Number							
Locate # send to cashier	add to profile	ad	l to State Print	ing list	contact cu	stomer 10/03/2019 maf	