



2019-2020 NON-TRIBAL MEMBER

# OVER-THE-COUNTER HUNT APPLICATION FORM

Please carefully select the appropriate hunt(s). Complete the application in its entirety and sign verifying the information is correct. Incomplete or incorrect applications will not be processed. **Mail Applications to:** Jicarilla Game and Fish Department, P.O. Box 313, Dulce, New Mexico 87528

LAST NAME: \_\_\_\_\_

HUNT TYPE: \_\_\_\_\_

## OVER-THE-COUNTER LICENSES

*Issued 1<sup>st</sup> come- 1<sup>st</sup> Served Beginning Feb. 1, 2019, unless otherwise noted*

To purchase an over-the-counter license, submit total license fees plus a \$50 non-refundable application and wildlife stamp fee per applicant

HUNT TYPE	SEASON DATES	# HUNTERS	License Price	TOTAL
RES-WIDE ARCHERY BULL ELK	September 26-30, 2019		\$6,000.00	=
SOUTH ARCHERY BULL ELK	September 1-25, 2019 (7 consecutive days) Permit Start Date:		\$6,000.00	=
SOUTH MUZZLELOADER BULL ELK	September 1-25, 2019 (7 consecutive days) Permit Start Date:		\$7,000.00	=
GROUP COW ELK (circle choice)	Dec. 11-13      Dec. 14-16      Dec. 20-22	5 6 7 8 9 10	\$950.00	=
EARLY RIFLE BULL ELK (circle choice)	October 1-5      October 6-10		\$7,000.00	=
LATE RIFLE BULL ELK (circle choice)	November 1-5, 2019      January 1-5, 2020		\$7,000.00	=
COW ELK OPTION (for Bull/Buck Hunters only)	Concurrent with Hunt Dates:		\$750.00	=
SPRING TURKEY	April 6 -May 15, 2019		\$500.00	=
WATERFOWL	October 5-November 30, 2019 Daily Permit Start Date(s):		\$20 / \$100	=
VARMINT PERMIT	April 1-Sept. 30, 2018 (3 consecutive days) Permit Start Date:		\$300.00	=
FALL BEAR	August 15 – October 31, 2019 (5 consecutive days) Permit Start Date:		\$600.00	=
HLM FALL BEAR	Option for HLM Elk Hunters Only (\$350 Harvest/Wound Fee)		\$250.00	=
Application and Wildlife Stamp fee \$50.00 x No. of applicants				=
<b>TOTAL</b>				<b>\$</b>

Tribal Guide(s): (If known) \_\_\_\_\_ Guest (if known): \_\_\_\_\_

How did you hear about hunting on the Jicarilla Apache Nation? \_\_\_\_\_

*By signing, each applicant certifies that all the information is true and correct to the best of their knowledge, and each applicant agrees and understands the rules and regulations of hunting on the Jicarilla Apache Nation*

1. Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_

2. Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_

3. Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_

**4. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**5. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**6. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**7. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**8. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**9. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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**10. Applicant Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Hunter Safety Card # (age 17 and under): \_\_\_\_\_  
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