

locate #

cashier

Oregon Department of Fish and Wildlife **Hunter Education Program**

Duplicate Hunter Safety Card Request

Fee \$10.00 for those 18 and above

Please print le	egibly – use nan	ne as it would	l have appeared o	on your origin	al certificat	ion card.	
First Name M			iddle Name		Last Name		
Maili	ng Address		Cit	y	State	Zip	
Email Address							
Date of Birth (MM/I	DD/YYYY)	Daytime Co	ontact Phone Num	ber OI	ODFW Hunter / Angler ID #		
City of original class (if known)			Year of class (ap	proximately)	nately) Name of Instructor (if known)		
Name of pe	l (if not applicant)		Relationship to applicant				
Special Instructions:						Age of Applicant	
	P	AYMENT	INFORMA	TION			
Please note that there is a \$\frac{9}{2}\$ and older. PAYMENT OP 1. Complete this form Salem, OR 9730 2. Complete this form 3. Complete this form Allow up to 3 weeks to pro will be mailed a new certificense documents and may cannot be located.	TIONS: In and send with check In and bring to any In and fax to 503-9 In and fax to fax t	ODFW Office 47-6009 . Certification r	order to: ODFW, A with credit card, canumbers cannot be ple located. ODFW H	ITN: Hunter Ed sh, check or mo provided until pa Junter / Angler I	I, 4034 Fairvi ney order. nyment is rece D # can be fo	ew Industrial Dr. SE, eived; all applicants ound on all existing	
☐ Visa ☐ MasterCard Name as it appears on			card:				
Card Number:			Expiration Date (MM/YY-Plus Security Code)				
Signature of Cardholder:							
	For OD	FW use only	– cost center 033	10 115023 32			
Initials Da			Certification Numb		Certificate Date		
locato #	send to	Add #/	Contact	<u> </u>			

Order card

Customer