

APPLICATION TO HUNT OR TRAP ABOARD MCB QUANTICO

NOTE: This application must be filled out completely. Falsification of any information is a violation of MCB regulations and will result in the termination of hunting or trapping privileges. PLEASE PRINT ALL INFORMATION.

CHECK ONE: ANNUAL HUNTING 3-DAY HUNTING TRAPPING

1. LAST NAME: _____ 2. FIRST NAME: _____ 3. MI: _____ 4. SUFFIX: (e.g., Sr.) _____

5. SSN: (Last 4) _____ 6. DATE OF BIRTH: _____ 7. AGE: _____ 8. STREET ADDRESS: _____ 9. CITY: _____

10. STATE: _____ 11. ZIP CODE: _____ 12. HOME PHONE: _____ 13. WORK PHONE: _____ 14. Were you an MCB Quantico licensed hunter last season?
 YES NO LICENSE NO.: _____

15. DRIVERS LICENSE: _____ 16. STATE: _____ 17. AUTO LICENSE TAG: _____ 18. STATE: _____

19. PERSONNEL CATEGORY: (Check the first applicable category.)

- 1. Active duty Marine.
- 2. Active duty military (not USMC) at MCB Quantico or HQMC.
- 3. Family member of #1 or #2 above.
- 4. Active duty military.
- 5. Retired military.
- 6. Family member of #4 or #5 above.
- 7. House guest of #1, #2, or #4 above.
- 8. Military reservist.
- 9. Active or retired MCB Quantico civilian employee.
- 10. All other personnel.

20. FOR OFFICE USE ONLY:

MCB LICENSE NUMBER: _____

CARD COLOR

GREEN BLUE BROWN

ISSUE DATE _____

21. CHECK IF APPLICABLE FOR NO-COST HUNTING LICENSE:

UNDERAGE HUNTER (UNDER 18) SENIOR CITIZEN (65 OR OVER) DISABLED

22. VA HUNT LICENSE NUMBER: _____

23. BIG GAME TAG NUMBER: _____

24. FAMILY MEMBER OR HOUSE GUEST: (List the name, telephone number, and address of sponsor below.)