



IDAHO FISH AND GAME HUNTER MEDICAL CONDITION CERTIFICATION

PLEASE TYPE OR PRINT LEGIBLY

APPLICANT'S CERTIFICATION

I certify that my medical condition will prevent me from performing the tasks required to hunt big game in the State of Idaho during the established current season for which the hereto attached hunting license(s) and tags that I applied for and received is (are) valid.

Check one of the following:

- I have not participated in Deer Elk Pronghorn Bighorn Sheep Mountain Goat Moose hunting activity in the State of Idaho for the year _____
- I have not hunted in the State of Idaho during the current hunting year.

Name (first, initial, last) _____
 Street Address _____
 City _____ State _____ Zip _____
 Phone () _____ - _____

The undersigned certifies under penalty of perjury that all of the above information provided above is true and correct. Any person willfully making false statements in this certification shall be guilty of a criminal misdemeanor and the refund request will be void. I hereby authorize the release of my personal medical records to the Idaho Department of Fish and Game or a Department's representative.

Applicant's signature _____ (Signature) _____ (Date)

LICENSED MEDICAL PROVIDER CERTIFICATION

_____ certify under penalty of criminal perjury that I am a Licensed
Licensed Medical Provider Name (print or type)

Medical Provider, licensed to practice medicine in the State of _____ and that

_____ has the following medical condition:
Applicant's Name (print or type)

_____ date of occurrence or diagnosis _____ and duration or expected recovery date _____, which will prevent him/her from performing the tasks necessary to exercise the privileges of hunting big game in the State of Idaho with the license issued to him/her. Any person willfully making false statements in this certification shall be guilty of a criminal misdemeanor and the refund request will be void.

Mail this completed form, the Refund Request form and applicable licenses and tag to:

IDFG License Section - Refunds
P.O. Box 25
Boise, ID 83707-0025