

# ing application rules

LINE	Last Day to REPORT ACTIVITIES (kill or not)
1/10/2016	
11/16/2015	
11/16/2015	
11/30/2015	
10/7/2015	
10/7/2015	
1/10/2016	
11/18/2015	
11/27/2015	
12/7/2015	
1/10/2016	
3/25/2016	
3/25/2016	
2/25/2016	
4/10/2016	
4/10/2016	
4/10/2016	
4/10/2016	
4/10/2016	
4/10/2016	
2/10/2016	

## Tag Return Deadlines

In accordance with the Natural Resources Fish and Wildlife Ordinance, all tag reports (Kill or No Kill, and lost tags) are required **TO BE REPORTED within 10 days of the last day of hunt**. In an attempt to help all hunters achieve this, the Natural Resources Department will allow reporting of activities the following ways; Telephone at 503-879-2424; e-mail at [NRD@grandronde.org](mailto:NRD@grandronde.org); mail at P.O. BOX 10, Grand Ronde, OR 97347; and in person to the Natural Resources Department, 47010 S.W. Hebo Road, Grand Ronde, OR 97347 where a secured drop box is available 24 hours a day, 7 days a week. As a reminder, cards not returned within the established deadlines are subject to suspension.

2ND SEASON ELK SPIKE ONLY
NOV. 21 - NOV. 27, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

Bow Deer
AUG. 29 - SEP. 27, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

BOW ELK - BULL ONLY
AUG. 29 - SEPT. 27, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

C/D DOE PERMITS
OCT. 24 - NOV. 6, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

YOUTH C/D DEER
OCT. 3 - NOV. 8, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

YOUTH Antlerless ELK
AUG. 1 - DEC. 31, 2015
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ ROLL #: _____
PHONE: (____) _____
EMAIL: _____
<p>As the person who is obtaining this Tribal Hunting tag, I declare under the penalty of perjury that to the best of my knowledge the information provided in obtaining this tag is true ad correct, and that I am qualified under all applicable laws and statutes to possess this tag and carry a weapon for the potential harvest of a game animal.</p> <p>By checking this box I acknowledge I have read the foregoing statement and agree with its terms. I have read and understand the rules and regulations of the State of Oregon, the Confederated Tribes of Grand Ronde, and the federal government. <input type="checkbox"/></p>

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