

2015 *NEW* TRIBAL TAGS RESERVATION ONLY			DEADLINES	
SEASONS	OPEN DAY	LAST DAY	Last Day to PICK UP TAG (if Drawn)	Last Day to REPORT ACTIVITIES (kill or not)
COAST BUCK	9/28/2015	10/2/2015	9/20/2015	10/12/2015
MUZZLELOADER DEER	11/21/2015	12/1/2015	11/13/2015	12/11/2015
1 <sup>st</sup> SEASON (Bull Only)	11/7/2015	11/13/2015	10/30/2015	11/23/2015
2 <sup>nd</sup> SEASON (Spike Only)	11/18/2015	11/20/2015	11/10/2015	11/30/2015

**TRIBAL TAG - RESERVATION ONLY**  
1ST SEASON ELK  
BULL ONLY  
NOV 7 - NOV 13, 2015

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_ ROLL #: \_\_\_\_\_  
PHONE: ( ) \_\_\_\_\_  
EMAIL: \_\_\_\_\_

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.  
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.

**TRIBAL TAG - RESERVATION ONLY**  
2ND SEASON ELK  
SPIKE ONLY  
NOV 18 - NOV 20, 2015

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_ ROLL #: \_\_\_\_\_  
PHONE: ( ) \_\_\_\_\_  
EMAIL: \_\_\_\_\_

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**TRIBAL TAG - RESERVATION ONLY**  
COASTAL BUCK  
SEP 28 - OCT 2, 2015

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_ ROLL #: \_\_\_\_\_  
PHONE: ( ) \_\_\_\_\_  
EMAIL: \_\_\_\_\_


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**TRIBAL TAG - RESERVATION ONLY**  
MUZZLELOADER DEER  
NOV 21 - DEC 1, 2015

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_ ROLL #: \_\_\_\_\_  
PHONE: ( ) \_\_\_\_\_  
EMAIL: \_\_\_\_\_

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.  
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**Sheridan Family Chiropractic**  
639 W Main St, Sheridan  
503-843-3888



**Kenneth A. Kelley, DC \* Tina Hargrove, DC**  
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CO-PAY WAIVED FOR TRIBAL MEMBERS

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# Adult Foster Program

## "A Place To Call Home"



The Tribe's Adult Foster Care lodges are committed to offering quality care to our Elders and helping them remain as independent as possible, while providing the personalized assistance they need. At our lodges, a wide range of services is available in a comfortable setting where privacy is respected and maximum independence is supported. For information, contact the Adult Foster Program director at 503-879-1694. ■