

APPLICATION FOR OUTFITTER/GUIDE REGISTRATION

LEGAL NAME: Legal name as it appears on your driver's license. Legal name must be listed identically on insurance and bond.				
LAST:		FIRST:		MI:
BUSINESS NAME: (Business names must first be registered with the Secretary of State's Office, Business Registry 503-986-2200)				
MAILING ADDRESS:	STREET/ROUTE/BOX	CITY	STATE	ZIP
PHYSICAL ADDRESS:	STREET/ROUTE	CITY	STATE	ZIP
SOCIAL SECURITY NO.: / /		DRIVER'S LICENSE NO.: STATE OF ISSUE:		
TELEPHONE NO.: ()		GENDER: MALE _____ FEMALE _____		
TYPE OF GUIDE SERVICE:		DATE OF BIRTH: / /		
<input type="checkbox"/> WHITEWATER RAFTING <input type="checkbox"/> FISHING- Specify species or type: _____ <input type="checkbox"/> HUNTING- Specify species or type: _____ <input type="checkbox"/> BACK COUNTRY <input type="checkbox"/> BICYCLING <input type="checkbox"/> OTHER- Specify type: _____ <input type="checkbox"/> OUTDOOR YOUTH PROGRAM (Requires additional proof of registration through the Services to Children and Families) <input type="checkbox"/> LOWER COLUMBIA RIVER CHARTER (Below the Longview-Rainier Bridge; NOT FOR OCEAN CHARTER)		EQUIPMENT: <input type="checkbox"/> EQUIPMENT INCLUDED * You provide needed supplies <input type="checkbox"/> EQUIPMENT NOT INCLUDED * Client provides his/her own AREA SERVED: (See attached map) ZONES: _____ EXPERIENCE: How many years experience do you have in the activity you plan to guide in? _____		

Do you collect deposits of more than \$100 per person? **Yes** **No**
 (A deposit is any advance payment in excess of \$100 per person, including a credit card, for a a trip. If yes, you must furnish proof of a \$5,000 surety bond or letter of credit. Present the attached bond form to your agent or banker.)

What type of boat do you use in your guide business?

Motorized **Non-Motorized** **Whitewater Raft** **None**
 No. of boats _____ No. of boats _____ No. of boats _____

If you use a motorboat, please complete the following:

Names of waters where you guide: _____

**Below please list your motorized boats registration number and the total number of passengers on board while guiding:
 List all additional boats on a separate sheet of paper.**

Boat Registration Number	Total Number of Passengers	Boat Registration Number	Total Number of Passengers	Boat Registration Number	Total Number of Passengers

I, the undersigned, do hereby make application for registration to conduct outfitter/guiding services in Oregon. I certify that all information provided on this application and all attachments are true and correct to the best of my knowledge, and further, that I will maintain in full force and effect the required insurance for not less than one (1) year from the date of registration. I understand that failure to complete all application information properly could delay the processing of my registration and that the application fee is non-refundable.

Legal Signature _____ **Date** _____

(For Marine Board use only)

First Aid Exp:	Affidavit Complete:	Fees Rec'd:
Insurance Exp:	Decals: Motorized Non-Motorized	Raft
Surety Bond: Y/N Coast Guard Exp:		
LEDS CHECK YES _____ NO _____ PENDING _____		