

MONTANA BOARD OF OUTFITTERS
301 SOUTH PARK, 4TH FLOOR - Delivery
P. O. Box 200513
Helena, Montana 59620-0513
(406) 841-2202 FAX (406) 841-2309
E-MAIL: dlibsout@mt.gov WEBSITE: www.outfitter.mt.gov

OUTFITTER ASSISTANT FORM

An Outfitter may hire or retain an Outfitter Assistant within 15 days of the first date the outfitter assistant serves any client for the outfitter under the particular emergency use. The outfitter shall mail the document, along with the payment of \$25.00, to the Board address listed above or deliver the document and payment directly to the Board office. **Your check or money order for \$25.00 must be made payable to the Montana Board of Outfitters.**

OUTFITTER INFORMATION

Name: _____ License#: _____
Address: _____ Telephone#: _____
E-Mail: _____

OUTFITTER ASSISTANT INFORMATION

Name: _____ Birth Date: _____
Address: _____ Telephone#: _____
E-Mail: _____

Does this Outfitter Assistant have a current Guide License Application on file with the Board?

Yes No

List all dates of service (not to exceed 15 days without Guide License Application filed by Outfitter Assistant): _____

Explanation for Emergency Replacement: _____

The outfitter must mail this completed form with payment to the Board within 15-days of the first date of Outfitter Assistant service, and a copy shall be provided to the Outfitter Assistant. The Outfitter Assistant shall carry the copy at all times in the field.

I, the undersigned Outfitter, hereby affirm under penalty of perjury that the above statements are true and accurate.

Outfitter Signature

Date