

2010

NONRESIDENT IOWA SPECIAL TURKEY LICENSE FOR SEVERELY DISABLED OR TERMINALLY ILL YOUTH

IOWA DNR
WALLACE STATE OFFICE BUILDING
DES MOINES, IOWA 50319-0034
515.281.5918
WWW.IOWADNR.GOV

Nonresident persons who are severely disabled or terminally ill and who are 21 years old or younger at the date of license purchase may obtain a paid turkey hunting license.

HOW TO APPLY FOR A LICENSE

- ◆ Read the “Definitions of Severely Disabled, Terminally Ill and Attending Physician” on reverse side to determine if you qualify.
- ◆ Fill out the Hunter Form on the reverse side.
- ◆ Have a physician complete the “Physician’s Certification” form on the reverse side.
- ◆ Application and full payment must be received by the DNR at least 21 days prior to the date of the hunt.
- ◆ Mail or fax the Hunter Form and Physician’s Certification to: Licensing Section, Iowa DNR, 502 E. 9th St., Des Moines, IA 50319. The fax number is (515) 281-6794.
- ◆ Payment may be made by check or money order made out to ‘Iowa DNR’ and mailed with the forms, or if forms are faxed, payment may be made by credit card after forms are received by DNR. Indicate on form the number for DNR to call to obtain credit card information

CHOICE OF SEASON

Youth Season.....	April 9-11
Season 1.....	April 12-15
Season 2.....	April 16-20
Season 3.....	April 21-27
Season 4.....	April 28-May16

*You must pick one of the seasons and enter it on the Hunter Form.

RESTRICTIONS

During the hunt an accompanying adult must be within arm’s reach of the licensee. The licensee is not required to complete the hunter safety program if the accompanying person is at least 18 years of age and is qualified to hunt and has a valid hunting license.

LICENSE REQUIREMENTS

Successful applicants will receive a turkey license, valid state-wide.

In addition to purchasing the nonresident turkey license, nonresidents must have a valid nonresident hunting license and pay the habitat fee to hunt turkey.

LICENSE FEES

Nonresident Turkey License.....	\$102.00
Nonresident Hunting License (18 and older).....	\$112.00
Nonresident Hunting License (under age 18).....	\$32.00
Habitat Fee.....	\$13.00

ADDITIONAL REGULATIONS

For additional information see the **2009/10 Iowa Hunting and Trapping Regulations**, available through the DNR or any Iowa license vendor. They are also available on the DNR’s website at www.iowadnr.gov (click on “Hunting & Wildlife”) or by contacting the DNR at 515-281-5918.

LEGAL WEAPONS

Legal weapons include: Archery and 10-, 12-, 16- and 20-gauge shotguns or muzzleloading shotguns shooting number 4, 5, 6, 7 1/2 or 8 lead or nontoxic shot. Number 2 or 3 nontoxic shot may also be used. Hunters may not have shot sizes other than those listed above on their person while hunting turkeys. Muzzleloading rifles may not be used to hunt turkeys. A physically disabled person incapable of shooting a bow may obtain a permit from the DNR to use a crossbow to hunt deer. A separate application for a crossbow permit is available at www.iowadnr.gov, and requires an additional Physician’s Certification.

PUBLIC RECORD

After the license has been issued, the names and towns of those receiving them will become part of the Natural Resource Commission official public record.

**DEFINITIONS OF SEVERELY DISABLED, TERMINALLY ILL AND
ATTENDING PHYSICIAN**

- ◆ **Severely Disabled:** A disability that limits or impairs the person's mobility or use of a hand or arm, and requires the fulltime assistance of another person, or is dependant on a wheelchair for the person's normal life routine.
- ◆ **Terminally Ill:** Diagnosed by attending physician with a life-threatening medical condition -- i.e. a progressive degenerative or malignant condition that has placed the youth's life in jeopardy.
- ◆ **Attending Physician:** Must be either a Doctor of Medicine, Doctor of Osteopathy, physician's assistant, or nurse practitioner.

**2010 Turkey Hunting License Affidavit for Severely Disabled or
Terminally Ill Nonresident Youth Hunters**
-- Hunter Form (Please type or print clearly) --

Name: _____ Choice of Season: _____
Address: _____
City: _____ State: _____ Zip: _____ County: _____
Telephone Number: _____ Hunter Safety Certificate number, if needed: _____
DOB: _____ Height: _____ Weight: _____ Eyes: _____ Sex: _____
IDNR Customer Number or Social Security number*: _____
If payment by credit card, provide name and telephone number for credit card information: _____

I attest that the information provided on this form is correct, that I am severely disabled or terminally ill as defined above, and that I have not applied for more than my legal limit of licenses.

SIGNATURE

DATE

**The Iowa Department of Natural Resources is required to collect social security numbers from all persons obtaining a hunting, fishing or other recreational license under section 252J.8 of the Code of Iowa and 42 U.S. Code 666(a)(13). Your social security number will serve as your principle identification number to determine your eligibility for licenses. It will be provided to law enforcement agencies and the Iowa Child Support Collection Unit to establish, modify and enforce child support obligations. It WILL NOT appear on your license.*

PHYSICIAN'S CERTIFICATION

I, _____, do hereby attest that I am the attending physician of the above-named applicant and declare that said applicant is severely disabled or terminally ill as defined above.

Physician Name (print please): _____
Address: _____ Telephone Number: _____
City: _____ State: _____ Zip: _____

SIGNATURE OF PHYSICIAN: _____

Patient terminally ill

Patient severely disabled