



Maine Department of Inland Fisheries and Wildlife
353 Water Street, 41 SHS, Augusta, ME 04333
Phone 207-287-8000 / Fax 207-287-9037

YOUTH CAMP TRIP LEADER PERMIT APPLICATION

In accordance with the provisions of the Revised States, Title 12, Section 12860

___ New Application \$20.00 ___ Renewal Applicant \$15.00 ___ Guide No Fee Last Year Licensed: ___

Name: _____ Date of Birth: ___/___/___
First Last MI

Mailing Address: _____
Street/Road or Box # City or Town State Zip Code

Email Address: _____ Phone Number: (____)____-____

Gender: ___ Height: ___ Weight: ___ Hair Color: ___ Eye Color: ___ MOSES ID: _____

Driver's License State: ___ Driver's License Number _____ Social Security Number _____
Required if US Citizen

Applicant's Sponsoring Camp Information:

Camp Name: _____ DHHS EST ID Number _____

Mailing Address: _____
Street/Road or Box # City or Town State Zip Code

Camp Email Address: _____ Camp Phone Number (____)____-____

I, _____, have met the requirements under Chapter 23.01 governing
Applicant Name - Printed

the Camp Trip Leader Special Application Procedure.

Applicant Signature Date Camp Director/Camp Sponsor Signature Date

New Applicants Camp Trip Leader Safety Course Verification: *(Completed by Instructor)* Pass Fail

Course Location & Address: _____

Instructor Name: _____ Course Completed Date: _____

The candidate has met the requirements under Chapter 23.01 for the Camp Trip Leader Safety Course and written exam, administered by this instructor.

Instructor Signature Date

MAIL APPLICATION AND DOCUMENTS, WITH THE APPROPRIATE FEE:

Make check payable to: Treasurer, State of Maine

**Department of Inland Fisheries and Wildlife
 Licensing Division - CTL
 353 Water Street, SHS 41
 Augusta, ME 04333**

Revised 4/8/2024

CREDIT CARD PAYMENT	
All Major Credit Cards Accepted	
Name on Card:	_____
Card #:	_____
Expiration Date:	____/____ Code: _____
Billing Address:	_____ _____