

# NJ NATIONAL GUARD DEER HUNTING PERMIT APPLICATION

_____ FIRST NAME		_____ MI	_____ LAST NAME		_____ RANK
_____ CONSERVATION ID (CID) NUMBER		_____ DATE OF BIRTH (MM/DD/YYYY)		_____ LAST FOUR of SSN	
_____ STREET MAILING ADDRESS		_____ CITY		_____ STATE	_____ ZIP CODE
_____ TELEPHONE NUMBER		_____ NJ NATIONAL GUARD UNIT			
_____ FT HEIGHT	_____ IN WEIGHT	_____ HAIR	_____ EYES	_____ DATE	

**Shotgun Permit Zone Choice:**

\_\_\_\_\_  
1<sup>st</sup>      \_\_\_\_\_  
2<sup>nd</sup>      \_\_\_\_\_  
3<sup>rd</sup>

**Antlered Buck Permit:**    Yes \_\_\_ No \_\_\_

**Muzzleloader Permit Zone Choice:**

\_\_\_\_\_  
1<sup>st</sup>      \_\_\_\_\_  
2<sup>nd</sup>      \_\_\_\_\_  
3<sup>rd</sup>

**Antlered Buck Permit:**    Yes \_\_\_ No \_\_\_

**Bow Permit Zone Choice:**

\_\_\_\_\_  
1<sup>st</sup>      \_\_\_\_\_  
2<sup>nd</sup>      \_\_\_\_\_  
3<sup>rd</sup>

**Antlered Buck Permit:**    Yes \_\_\_ No \_\_\_

**CHECK YOUR FISH & WILDLIFE DIGEST FOR CORRECT HUNTING ZONES, RULES, REGULATIONS & REQUIREMENTS.**

**RIFLE PERMIT REQUIRED WHEN HUNTING WITH A MUZZLELOADER.**

MAIL TO:  
Department of Military Affairs  
PO Box 340  
Trenton, New Jersey 08625-0340  
ATTN: Hunting & Fishing

FOR ADDITIONAL ASSISTANCE CONTACT:  
HFL@dma.nj.gov  
FAX: 609-530-7193