



**COQUILLE INDIAN TRIBE**  
Culture, Education and Library Services  
495 Miluk Drive Coos Bay, Oregon 97420  
Tel 541-756-0904 Fax 541-888-2418  
www.coquilletribe.org

## Subsistence Program Application

Name \_\_\_\_\_ Telephone \_\_\_\_\_

E-mail \_\_\_\_\_ Cell phone \_\_\_\_\_

Address \_\_\_\_\_

Check if address is new

City

State

Zip

If the applicant is a minor, please reimburse to:

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Cost \$ \_\_\_\_\_

Subsistence Supplies \$ \_\_\_\_\_  
(Maximum \$200.00 per year)

**A copy of the license, tag, or permit with applicant's name must accompany this application.**

**ELIGIBLE SERVICE: (please check all that apply)**

- SPORTSMAN PACK  
 FISH/SHELLFISH LICENSE  
 WILDLIFE TAG

- EXOTIC GAME  
 TRAPPER LICENSE  
 FUR-BEARING GAME

I certify that the information on this form is true and correct to the best of my knowledge.

Applicant's signature \_\_\_\_\_

Enrollment No. \_\_\_\_\_

Date \_\_\_\_\_