



**LA DEPT OF WILDLIFE AND FISHERIES  
ALLIGATOR SPORT/HELPER  
LICENSE APPLICATION FORM**



SSN: \_\_\_\_\_ ZONE: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ COLOR HAIR: \_\_\_\_\_ COLOR EYES: \_\_\_\_\_

HEIGHT: \_\_\_\_\_ ft \_\_\_\_\_ in WEIGHT: \_\_\_\_\_ \*HUNTER SAFETY #: \_\_\_\_\_

\*No person born on or after September 1, 1969 will be issued an alligator hunting license unless that person has completed an approved Hunter Education Course

**HUNTER/GUIDE'S NAME**

**HUNTER/GUIDE'S SSN**

- |          |       |
|----------|-------|
| 1) _____ | _____ |
| 2) _____ | _____ |
| 3) _____ | _____ |
| 4) _____ | _____ |
| 5) _____ | _____ |
| 6) _____ | _____ |

**\*\*\* DO NOT WRITE \*\*\*  
IN THIS BOX**

**HUNTER/GUIDE'S  
ALLIGATOR LICENSE #**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\*\*\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

LICENSE # ISSUED TO THIS APPLICANT \_\_\_\_\_

NON-RESIDENT	_____	\$150
RESIDENT	_____	\$25