



**Maine Department of Inland Fisheries and Wildlife**  
**353 Water Street, 41 SHS, Augusta, ME 04333**  
**Phone 207-287-5232 / Fax 207-287-9037**

### NEW WHITEWATER GUIDE LICENSE APPLICATION

*In accordance with the provisions of the Revised Statutes, Title 12, Section 12909.*

Application Fee - \$100.00 \_\_\_\_\_ 3-Year License Fee - \$89.00: \_\_\_\_\_ Level II Upgrade: \_\_\_\_\_ Moses ID Number: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
First Last MI

Gender: \_\_\_\_\_ Eyes: \_\_\_\_\_ Height: \_\_\_\_\_ Hair: \_\_\_\_\_ Weight: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
Street or Road City or Town State Zip Code

Mailing Address: \_\_\_\_\_  
Street or Box # City or Town State Zip Code

Driver's License Number: \_\_\_\_\_ Driver's License State: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
**Required**

1. Have you been convicted of guiding without a license in this state or another state or province?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes, please explain: \_\_\_\_\_
2. Have you been previously licensed as a Whitewater Guide? Yes: \_\_\_\_\_ No: \_\_\_\_\_ State? \_\_\_\_\_
3. How many years were you licensed as a Whitewater Guide? \_\_\_\_\_ Last year licensed? \_\_\_\_\_

**NEW APPLICANTS: (A)** Answer questions 1-3. **(B)** Submit proof (copy) of current C.P.R. and first aid certification, in American Red Cross, National Safety Council standard first aid and C.P.R. or equivalent. **(C)** Submit a signed Whitewater Guide Training Log. **(D)** Non-refundable \$100.00 application fee and \$89.00 fee for your 3-year license. **(F)** Sign and date at the bottom of the document.

Applicant paying by check or money order must make check payable to Treasurer State of Maine. **No cash payments allowed**, except if the exam is given at the main office in Augusta.

**Submit application and payment:** Department of Inland Fisheries and Wildlife, Licensing Division, Attention: **Billie-Jo Walker**, 353 Water Street, Augusta, ME 04333, or email required documents and card payment to [Billie-Jo.Walker@maine.gov](mailto:Billie-Jo.Walker@maine.gov).

If, due to a disability, you need any accommodations for the written exam process, you will need to notify the Licensing Division, [Billie-Jo.Walker@maine.gov](mailto:Billie-Jo.Walker@maine.gov) or call 207-287-5232 within 10 days of the exam date.

**LEVEL II UPGRADE:** Applicants must complete this application and submit a Whitewater Guide Training Log to: MDIFW, Licensing Division, Attention: Billie-Jo Walker, 353 Water Street, Augusta, ME 04333, or email Billie-Jo Walker at [Billie-Jo.Walker@maine.gov](mailto:Billie-Jo.Walker@maine.gov).



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## NEW WHITEWATER GUIDE LICENSE APPLICATION CONTINUED

### BY AFFIXING YOUR SIGNATURE BELOW, YOU:

- A. I Certify that all statements made hereon, and any documents provided are true and accurate. Understand that any false statement made in this application or in any documents provided may result in denial, suspension or revocation of your whitewater guide's license, and possible criminal prosecution.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**Applicant**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**New Applicant Only**

**SEND APPLICATION WITH THE APPROPRIATE FEE:**  
Make check payable to: Treasurer, State of Maine

**Department of Inland Fisheries and Wildlife**  
**Licensing Division**  
353 Water Street, SHS 41  
Augusta, ME 04333  
[Billie-Jo.Walker@maine.gov](mailto:Billie-Jo.Walker@maine.gov)

### CREDIT CARD PAYMENT

All Major Credit Cards Accepted

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_ Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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