

DISABLED SPORTSMAN PROGRAM

The North Carolina Wildlife Resources Commission has developed several programs, outlined below, designed to benefit persons with disabilities. The required medical certification for each is attached.

I. The **Disabled Access Program** is designed to generally improve access for persons with disabilities on game lands where landowners agree. It allows persons with limited physical mobility to operate vehicles, including ATVs, on any Commission-maintained road open for vehicular travel, those trails posted for vehicular travel and on open-gated or ungated roads otherwise closed to vehicular traffic on certain game lands and to have access to special waterfowl hunting blinds designed for hunters with disabilities. A list of Game Lands affected by this is available in the *N.C. Inland Fishing, Hunting & Trapping Regulations Digest* available at wildlife service agent locations or online at www.ncwildlife.org. There is no fee associated with this permit. Participants will be issued permanent identification cards, companion cards, and vehicular access permits valid for as long as the disability remains.

Qualifications: Competent medical evidence must be submitted indicating that a disability exists that limits physical mobility to the extent that normal utilization of the game lands is not possible without vehicular assistance.

II. The **Disabled Sportsman Hunt Certification** is a medical certification used to establish eligibility for participation in disabled hunt opportunities. This certification is only necessary when the applicant does not possess a disabled veteran or totally disabled license. This certification is not a license; therefore, a valid hunting license, in addition to the hunt permit, is required when participating in a disabled hunt opportunity. There is no fee for this certification and it shall remain valid as long as the qualifying disability persists. A list of disabled hunt opportunities and permit hunt application procedures is available in the *Permit Hunting Opportunities Guide* online at www.ncwildlife.org.

Qualifications: Medical certification in one of the following disabilities:

- 1. missing fifty percent (50%) or more of one or more limbs, whether by amputation or natural causes;
- 2. paralysis of one or more limbs;
- 3. dysfunction of one or more limbs rendering the individual unable to perform the task of grasping and lifting with the hands and arms or unable to walk without mechanical assistance, other than a cane:
- 4. disease, injury, or defect confining the individual to a wheelchair, walker, or crutches;
- 5. legal deafness.

Enrollment in any of these programs may continue as long as the qualifying disability remains. Participants should remember that all normal rules and regulations concerning license requirements, bag limits, manner of take, etc. apply to these program opportunities.



DISABLED SPORTSMAN PROGRAM APPLICATION

Check Appropri	ate Program(s):		d Access Pro e required)	gram ∐ Di:		rtsman Hunt Certification (no fee required)	
Name:		WRC Customer # If available					
Name:			Last)			If available	
Resident Address:	Street		City		State	Zip	
Mailing Address:(if different from above)						·	
(if different from above)	Street or PC) Box	City		State	Zip	
E-mail Address:			T	elephone: ()		
Date of Birth:	Year	D	river License	#			
	Month Day	Year					
Signature of Applicant				Date			
I. Medical Certific				eruncation(s)	Below Pric	or to Submission	
				_ has a physica vithout vehicular	I disability that assistance.	nat limits ambulatory mobilit	
Print or Type Medica		Medical Do	ctor's Signature		Date		
					()		
Doctor's Mailing Address		City	State	Zip	_ ()	Telephone	
 paralysis of dysfunction hands and a 	percent (50%) or mone or more limbs; of one or more limburms or unable to wa	ore of one or rose rendering the like without med	more limbs, wh ne individual u chanical assista	has one or mether by amputanable to performance, other than	ation or natur n the task of a cane;	-	
Print or Type Medica	al Doctor's Name		Medical Do	octor's Signature	()	Date	
Doctor's Mailing Add	dress	City	State	Zip		Telephone	
Mail completed app	olication to:	Licer 1707	Wildlife Resonse Section Mail Service		ssion		

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Website: www.ncwildlife.org