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CLIENT INFORMATION

Full Name: _____

Bristol Bay Cell and Land Line Number: _____

Permanent Mailing Address: _____

City, State, Zip Code: _____

Permanent Telephone: _____

Email Address (CRITICAL): _____

Personal Cell Phone: _____

**PERMANENT CONTACT OTHER THAN YOU WHO WILL KNOW YOUR
LOCATION YEAR-ROUND**

Full Name: _____

Permanent Mailing Address: _____

City, State, Zip Code: _____

Permanent Telephone: _____

Email Address: _____

Cell Phone: _____

OTHER INFORMATION

Vessel Name: _____

ADFG Number: _____

Processor/ Contact Person: _____

Telephone Number: _____