

Please supply all required information for every hunter wishing to hunt as an individual (archery only) or participate in a party hunt. Failure to do so will disqualify the hunter for the property draws.

- Please observe the party size limits (minimum and maximum) for each property.
- NOTE: All Terrain Vehicles are not permitted on UTRCA property. Contact the UTRCA for further information.
- Mail or email your completed application to:

mail: Jason Belfry, Upper Thames River Conservation Authority, 1424 Clarke Road, London, ON N5V 5B9

email: Jason Belfry - belfryj@thamesriver.on.ca or Paul Switzer - switzerp@thamesriver.on.ca

See <https://thamesriver.on.ca/wp-content/uploads/2024-UTRCA-hunting-information.pdf> for application deadlines.

1. Indicate your desired hunting method/time period (**SELECT ONE ONLY**) and provide the required information. Note:
 - Each person, whether hunting individually or in a party, may only apply to one hunt.
 - **For archery hunting ONLY**, individuals or parties may choose a first and second choice property. If your first choice property is filled by another individual/party, you will be entered into the draw for your second choice.

Check 1 Hunt Only		Property (County) WMU	Party Size Limits	Your Party Size
Archery Hunt (Indicate 1st and 2nd choice properties)				
1 st	2 nd			
<input type="checkbox"/>	<input type="checkbox"/>	Ivey Tract (Middlesex) WMU 91 *	8 individuals or party	
<input type="checkbox"/>	<input type="checkbox"/>	Dorchester Swamp (Middlesex) WMU 91 *	12 individuals and/or party	
<input type="checkbox"/>	<input type="checkbox"/>	Kintore Swamp (Oxford) WMU 91 *	3 individuals and/or party	
<input type="checkbox"/>	<input type="checkbox"/>	Downey Tract (Oxford) WMU 91 *	2 individuals and/or party	
<input type="checkbox"/>	<input type="checkbox"/>	Golspie Swamp (Oxford) WMU 91 *	6 individuals and/or party	
<input type="checkbox"/>	<input type="checkbox"/>	North Trout Creek (Perth) WMU 86	3 individuals and/or party	
<input type="checkbox"/>	<input type="checkbox"/>	Memorial Forest (Perth) WMU 86	6 individuals and/or party	
Muzzle Load Hunt				
<input type="checkbox"/>		Ivey Tract (Middlesex) WMU 91A	max. 6 (no min.), individuals and/or party	
November Controlled Hunt				
<input type="checkbox"/>		Zorra WCA, Lines 29 & 31 (Oxford) WMU 91B	min. 6, max. 12, party only	
December Controlled Hunt				
<input type="checkbox"/>		Memorial Forest (Perth) WMU 86B	min. 6, max. 12, party only	
<input type="checkbox"/>		Cade Tract (Perth) WMU 86B	max. 4 (no min.), party only	
<input type="checkbox"/>		Zorra WCA, Lines 29 & 31 (Oxford) WMU 91B	min. 6, max. 12, party only	
<input type="checkbox"/>		Kintore Swamp (Oxford) WMU 91B	max. 4 (no min.), party only	
<input type="checkbox"/>		Downey Tract (Oxford) WMU 91B	max. 4 (no min.), party only	
<input type="checkbox"/>		Golspie Swamp (Oxford) WMU 91B	min. 6, max. 12, party only	

* Harvesting of Wild Turkey, using archery equipment only, is permitted on these UTRCA properties during the MNRF fall Wild Turkey season, provided the hunter possesses all MNRF required licences and abides by MNRF regulations applying to fall Wild Turkey hunting.

2. Provide the following information for each hunter applying, beginning with the party leader. Additional forms are on the second page; copy as needed for all your party members. Note: a PAL number is NOT required if archery hunting.

Party Leader (Hunter #1)	Name:		
Address:			
Email:		Phone Number:	
Outdoors Card Number:		Expiry Date:	
Insurance Association Name:			
Policy Number:		Expiry Date:	
Possession Acquisition License Number:		Expiry Date:	

Hunter #2	Name:	
Address:		
Email:	Phone Number:	
Outdoors Card Number:	Expiry Date:	
Insurance Association Name:		
Policy Number:	Expiry Date:	
Possession Acquisition License Number:	Expiry Date:	

Hunter #3	Name:	
Address:		
Email:	Phone Number:	
Outdoors Card Number:	Expiry Date:	
Insurance Association Name:		
Policy Number:	Expiry Date:	
Possession Acquisition License Number:	Expiry Date:	

Hunter #4	Name:	
Address:		
Email:	Phone Number:	
Outdoors Card Number:	Expiry Date:	
Insurance Association Name:		
Policy Number:	Expiry Date:	
Possession Acquisition License Number:	Expiry Date:	

Hunter #5	Name:	
Address:		
Email:	Phone Number:	
Outdoors Card Number:	Expiry Date:	
Insurance Association Name:		
Policy Number:	Expiry Date:	
Possession Acquisition License Number:	Expiry Date:	

Hunter #6	Name:	
Address:		
Email:	Phone Number:	
Outdoors Card Number:	Expiry Date:	
Insurance Association Name:		
Policy Number:	Expiry Date:	
Possession Acquisition License Number:	Expiry Date:	