

# TAXIDERMIST Instruction Register

Client Name: \_\_\_\_\_ # \_\_\_\_\_

Physical address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Tel #: \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail: \_\_\_\_\_

**DIP & SHIP ONLY:** \_\_\_\_\_

Clearing Agent: \_\_\_\_\_

Taxidermy: \_\_\_\_\_

**Outfitter:** \_\_\_\_\_

Company name: \_\_\_\_\_

Adress: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Tel #: \_\_\_\_\_ Cell # \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Documents: 

Permit	HO	PH	P 2 H	T H R	P3	PH REG	OTHER
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Tag #	Species	Measurement	Item	Instructions	*

## ***Donation of Trophy Parts***

This is to serve as confirmation that I \_\_\_\_\_

give full permission to \_\_\_\_\_

to keep & process the remainder of my trophies, that will not be

exported for my own use. (MARKED \*) Signature: \_\_\_\_\_

Outfitter: \_\_\_\_\_ Date \_\_\_\_\_

