

Cross-bow Licence – Medical Certification Letter

Dear Physician or Therapist:

Date: _____

Mr./Ms. _____ is applying to the Alberta Fish and Wildlife Division for a Cross-bow Licence.

Cross-bow Licences are made available to persons that have specified physical disabilities only. These are described in an Information Sheet produced by Alberta Sustainable Resource Development entitled “INFORMATION SHEET- Cross-bow Licence Criteria”. *IMPORTANT NOTE: A licence of this kind is not issued for therapeutic reasons.*

1. Have you reviewed the “INFORMATION SHEET- Cross-bow Licence Criteria”?

YES NO

Certain physical conditions, afflictions or handicaps involving an upper limb may allow an individual to qualify only if they have been medically certified using this approved letter format by a physician, occupational therapist or physiotherapist respecting the disability.

2. Please briefly describe the nature of the applicant’s condition, affliction or handicap below (or attach a separate page).

3. In order to be medically certified, it must be confirmed whether the applicant suffers from a physical condition, affliction or handicap that meets specific regulated criteria.

Question 1: In your professional opinion, does this condition prevent that individual from utilizing conventional archery hunting equipment, consisting of a bow and arrow where the bow requires 40 pounds of pull to draw an arrow 28 inches in length to its head?

YES NO

Question 2: In your professional opinion, will the applicant’s condition improve within the next 3 years?

YES NO

NOTE: The term “medically certified” involves the provision for confirmation by a physician, occupational therapist or physiotherapist on this form that the applicant meets the criteria set out in the *Wildlife Regulation*. Any information obtained will be held in confidence.

I have read and understand the contents of this letter.

_____/_____/_____
Physician/Therapist - Printed Name Registration No. Physician/Therapist Signature

Address: _____ Telephone No. _____ Date: _____

Applicant – Return this completed letter and application to the Alberta Fish and Wildlife Division.