

## AUTHORIZED HELPERS ACTING UNDER A LICENCE TO PROVIDE BEAR HUNTING SERVICES FORM

The Ministry of Natural Resources (the “Ministry”) issues a Licence to Provide Bear Hunting Services (the “Licence”) to allow a person to provide black bear hunting services. Each Holder of the Licence (the “Licensee”) is subject to certain requirements, including ensuring that additional individuals affiliated with a Licence (“Authorized Helpers”) remain in compliance with applicable laws.

In order to administer the Licence and such requirements, the Licensee is required to collect and disclose to the Ministry certain information about their Authorized Helpers (as described below).

### **Authorized Helper Applicant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

The Ministry is bound by the *Freedom of Information and Protection of Privacy Act* (Ontario) and the following notice is being provided to you pursuant to that act:

1. The Licensee, on behalf of the Ministry, is collecting your personal information under the authority of section 82 of the *Fish and Wildlife Conservation Act, 1997* (Ontario).
2. The personal information provided will be used to (i) identify you as a person relevant to the Licensee’s compliance with Licence rules, (ii) and confirm that you have not taken any action that, in the Ministry’s opinion was inconsistent with applicable law (including conducting a search for any records of offence committed under *the Fish and Wildlife Conservation Act, 1997*), the Licence and its associated policies and procedures or with the Ontario bear management policy. This information will be kept on file for the duration of time the Licensee holds the Licence.
3. Please contact the position noted below if you require further information on the collection and use of your personal information.

Jennifer Tremblay  
Ministry of Natural Resources  
48 Mission Road Wawa ON P0S 1K0  
EMAIL: [jennifer.tremblay@ontario.ca](mailto:jennifer.tremblay@ontario.ca) or contact 705-992-5616

I hereby consent to the collection and use of my personal information as described above:

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(print name)

\_\_\_\_\_  
(date)