WYOMING GAME AND FISH DEPARTMENT
TAXIDERMIST LICENSE
ORIGINAL APPLICATION
FOR THE YEAR OF **2026**

OFFICE USE ONLY
LICENSE #:
DATE:
INITIALS:

Application requested:
☐ Resident (LICENSE FEE $69.00) OR ☐ Nonresident (LICENSE FEE $723.00)

LAST NAME _____ FIRST NAME _____ M.I. SUFFIX _____ DATE OF BIRTH _____

HOME MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____ PHONE NUMBER _____

SPORTSPERSON I.D. _____ Weight _____ Height (Ft - Inches) _____ Eye Color _____ Hair Color _____ Sex _____

NAME OF BUSINESS _____ BUSINESS MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

BUSINESS PHONE NUMBER _____ BUSINESS PHYSICAL LOCATION _____ CITY _____ STATE _____ ZIP CODE _____

XXX – XX – _____ SOCIAL SECURITY NUMBER (Last 4 digits required)

EMAIL ADDRESS (optional) _____

Resident applicant must complete the following:

PROOF OF WYOMING RESIDENCY:

YRS WY RES. or Days Active Military in WY: ☐☐ ☐☐☐

ONE of the following must be provided: WY Driver's License Number or WY ID Card Number ☐☐☐☐☐☐ – ☐☐☐

OR

Complete the PROOF OF RESIDENCY form ON NEXT PAGE

Under penalty of prosecution, I swear or affirm that the information given by me on this application is true and correct. I swear, under penalty of prosecution, that I am a Wyoming Resident as defined in W.S. 23-1 -102(a)(ix)(xv), 23-2-101(a) and 23-1-107 and have been domiciled in Wyoming for not less than one (1) year and have not claimed residency elsewhere for any purpose during the one (1) year immediately preceding the date of application for this license(s).

I, the undersigned, depose and say that I am a taxidermist and that I have a working knowledge of Wyoming Game and Fish laws pertaining to big and trophy game animals, small game animals, furbearing animals, game birds, migratory game birds, protected birds and animals and game fish. I further depose and say I will operate in accordance with regulations governing taxidermists approved by the Wyoming Game and Fish Commission.

I understand that I must keep a daily record of all wildlife specimens received from within or without the State of Wyoming. Said records shall include names and addresses of persons from whom wildlife specimens were received, date of receipt, location where taken, approximate date killed, description and any identifying number (i.e., licenses, tags, shipping permits, export permits, etc.) documenting origin.

_____ _____
Applicant Signature Date

OR

_____ _____
Parent or Legal Guardian's Signature Date
(If Applicant is under the age of 18)

☐ Check the box only if you would like your e-mail address and telephone number **made available** as public information as per state law (W.S. § 23-1-706). Other Information given on application may be made available as public information, except as provided by law.

RESIDENT TAXIDERMIST: Submit your application form and fee to your local game warden for approval. A Resident Taxidermist shall mail or deliver taxidermist records to the Regional Game and Fish Office in accordance with the address listed on the back of this form in the geographic region where the taxidermist business is located on or before January 31 of the year following for which the taxidermist license was valid.

NONRESIDENT TAXIDERMIST: Submit your application form and fee (Money Order or Cashier's Check) to the Game and Fish Headquarters at the address indicated below. A Nonresident Taxidermist shall mail or deliver taxidermist records to the Wyoming Game and Fish Department, Wildlife Division Law Enforcement, 5400 Bishop Boulevard, Cheyenne, Wyoming 82006 on or before January 31 of the year following for which the taxidermist license was valid.

NOTE: ONLY CERTIFIED CHECK, CASHIER'S CHECK OR MONEY ORDER WILL BE ACCEPTED. PERSONAL CHECKS DRAWN ON WYOMING BANKS ARE ACCEPTED FROM WYOMING RESIDENTS. NO TWO PARTY CHECKS ACCEPTED.

Casper Regional Office	3030 Energy Lane, Suite 100 Casper, WY 82604	1-800-233-8544	1-307-473-3400
Cody Regional Office	2 Tilden Trail Cody, WY 82414	1-800-654-1178	1-307-527-7125
Green River Regional Office	351 Astle Ave. Green River, WY 82935	1-800-843-8096	1-307-875-3223
Jackson Regional Office	P.O. Box 67, 420 N. Cache Jackson, WY 83001	1-800-423-4113	1-307-733-2321
Lander Regional Office	260 Buena Vista Dr. Lander, WY 82520	1-800-654-7862	1-307-332-2688
Laramie Regional Office	1212 South Adams St. Laramie, WY 82070	1-800-843-2352	1-307-745-4046
Pinedale Regional Office	P.O. Box 850 Pinedale, WY 82941	1-800-452-9107	1-307-367-4353
Sheridan Regional Office	700 Valley View Drive Sheridan, WY 82801	1-800-331-9834	1-307-672-7418

TO BE COMPLETED BY DEPARTMENT

REVIEWED AND APPROVED BY:

_____ _____

GAME WARDEN SIGNATURE & DATE

COMMERCIAL OPERATIONS COORDINATOR SIGNATURE & DATE

_____ _____

GAME WARDEN Printed Name

COMMERCIAL OPERATIONS COORDINATOR Printed Name

COMMENTS: _____

PROOF OF WYOMING RESIDENCY

If you do not have a current Wyoming driver's license or a current Wyoming Identification card, the following information must be provided. FAILURE TO PROVIDE THIS INFORMATION SHALL RESULT IN THE DENIAL OF A LICENSE BEING ISSUED.

PLEASE PROVIDE A VERIFIABLE ANSWER TO <u>ONE</u> OF THE FOLLOWING (Please Print):

1. I, or the person for whom I am applying (resident applicant under the age of 18), have/has resided at the following address(es) for the past one (1) year immediately preceding the date of this application:

   _____/_____

   Street Address Mailing Address
2. I have attended the following Wyoming school(s) for the past one (1) year immediately preceding the date of this application:_____Location:_____
3. If a minor dependent, name of parent or legal guardian who is a Wyoming resident:_____
4. I am currently an active duty member of the military and have been stationed in Wyoming for ninety (90) days or more, but was NOT a Wyoming resident when I entered the military.
   _____YES, I meet the above criteria per W.S. § 23-1-107(f).
5. I was a resident of Wyoming at the time I entered the military and am currently serving in active military duty outside of Wyoming; AND I have made no claim of residency in any other state, territory or country for any purpose; AND Wyoming remains my declared home of record.
   _____YES, I meet the above criteria per W.S. § 23-1-107(f).
6. I was NOT a Wyoming resident when I entered military service, but was stationed in Wyoming for ninety (90) days or more and am currently serving in active military duty outside of Wyoming; AND I have made no claim of residency in any other state, territory or country for any purpose; AND I have established my home of record in Wyoming; AND I have maintained my voter registration in Wyoming.
   _____YES, I meet the above criteria per W.S. § 23-1-107(f).
7. I am the spouse or minor dependent of an active duty member of the military qualifying as a Wyoming resident per W.S. § 23-1-107(f); AND I have made no claim of residency in any other state, territory or country for any purpose.
   _____YES, I meet the above criteria per W.S. § 23-1-107(g).

I further understand that the Wyoming Game and Fish Department will check the information provided to verify applicant's residency in the state of Wyoming.

_____ *OR* _____

Resident Applicant's Signature

Parent/Guardian Signature
(If applicant is under the age of 18; required if applicant is less than 14 years old.)

REV 10/2025