Medical Professional’s Advisory Letter (2019)

To Whom It May Concern,

In an effort to ensure that all B.C. residents who wish to hunt have a reasonable opportunity to do so, the Ministry of Forests, Lands, Natural Resource Operations and Rural Development (the “Ministry”) has implemented an application process to facilitate the hunting activities of persons with physical disabilities. Physically disabled hunters can apply for permits that would enable them to do the following:

A. Discharge a firearm from a motor vehicle
   - This is intended for those persons who are unable to safely exit a motor vehicle, place two feet on the ground, stand up and lean on the vehicle to shoot (e.g., paraplegics)

B. Use a motor vehicle to hunt in areas closed to motor vehicles
   - This is primarily intended for those persons who are unable to walk very far without mobility assistance (e.g., cane, walker, crutches, wheelchair, or prosthetics)

C. Be assisted by having one or more hunting companions, to track, kill and retrieve big game wounded by the disabled person (open or closed area)
   - This is primarily intended for those persons who are unable to walk very far without mobility assistance (e.g., cane, walker, crutches, wheelchair, or prosthetics)

D. Be assisted by having one or more designated (proxy) hunting companions, to hunt and kill big game on behalf of the disabled person
   - This is intended for those persons who are completely unable to discharge a firearm or crossbow due to their physical disability (e.g., quadriplegics, double arm amputee)

Your completion of the attached medical assessment form will enable the Ministry to determine whether the assessed applicant is eligible for the permit(s) sought. If you have questions or concerns, please contact Terry Ahern, my Medical Assessment Advisor, in Victoria at (778) 698-9228.

Sincerely,

Jennifer Psyllakis
Director of Wildlife
Wildlife and Habitat Branch
Ministry of Forests, Lands, Natural Resource Operations & Rural Development
TO THE MEDICAL DOCTOR: Please complete the following:

1. Name of applicant: ____________________________________________________________

2. Describe applicant's physical disability in lay terms: ____________________________________________

3. Is the disability permanent? Yes □ No □ Other (describe) ____________________________

4. If the applicant is applying for a permit to discharge a firearm from a motor vehicle, please address the following:
   A. Is the applicant, despite their disability, able to safely exit a motor vehicle, position himself
      or herself on uneven terrain (including using the outside of the vehicle for support), and load,
      hold, aim, and discharge a firearm? Yes □ No □
      If yes, please answer the following:
      i. How long would it take applicant to exit the vehicle? ____________________________
      ii. Would this cause the applicant considerable pain? Yes □ No □
      iii. Does the applicant require mobility assistance to exit the vehicle (please circle
           applicable one: cane, walker, crutches, wheelchair, prosthetics, other)?
           Yes □ No □

   B. Is the applicant able to safely load, hold, aim, and discharge a firearm while in or on a motor
      vehicle? Yes □ No □
5. If the applicant is applying for a permit to use a motor vehicle in a place closed to motor vehicle use, or to have a hunting companion track, kill, and retrieve big game wounded by the applicant, please address the following:

A. Is the applicant able to walk 100 metres on even ground while carrying a firearm?
   Yes ☐  No ☐

If yes, please answer the following:
   i. How long would it take applicant to walk 100m on even ground? ___________
   ii. Would this cause the applicant considerable pain? Yes ☐ No ☐
   iii. Does the applicant require mobility assistance to ambulate (please circle applicable one: cane, walker, crutches, wheelchair, prosthetics, other)? Yes ☐ No ☐

B. If the applicant is able to walk 100 metres but has a physical disability that significantly affects their ability to hunt, please explain how it affects their ability to hunt.

__________________________________________

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6. If the applicant is applying for a permit for a designated (proxy) hunting companion to hunt on their behalf, is the applicant completely physically unable to discharge a firearm or crossbow (e.g., quadriplegic, double-arm amputee)? Yes ☐ No ☐

If yes, please describe the nature of the applicants' disability.

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__________________________________________
7. Please specify any additional medical information (in lay terms) relevant to the applicant’s permit request, especially if you feel the applicant has a physical disability that ought to be considered in deciding whether to issue the permit(s) requested, despite the answers to the questions above.

Name of Medical Doctor: __________________________ B.C. Physician Licence #: ___________

Address: _______________________________________

Telephone No.: ________________________________

Medical Doctor’s Signature: _______________________ Date signed: ______________________

TO THE APPLICANT: This completed medical form, in its entirety, MUST accompany your completed Disabled Hunting Permit application and be submitted to a FrontCounter BC office.

By Phone
Toll free at: 1-877-855-3222
From outside North America at: ++1-778-372-0729

By Email
Send us an e-mail at: FrontCounterBC@gov.bc.ca

In Person
Come and visit one of our many locations across B.C. (http://www.frontcounterbc.ca/locations/)

For Ministry Use Only:
This applicant is eligible for the following permit(s):

- 3 (1)(c)(i) - shoot from a vehicle Yes____ No____
- 3 (2) - access to motor vehicle closed area(s) Yes____ No____
- 2 (aa) - hunting companion Yes____ No____
- 2 (bb) - designated hunting companion Yes____ No____

*Reassessment required (if applicant renews) Yes____ No____

*If reassessed, applicant must submit a new medical assessment form

__________________________ __________________________
Signature of Director (or deputy) Date of Signature