

ALASKA ESKIMO WHALING COMMISSION
P.O. BOX 570
BARROW, ALASKA 99723
WHALING CAPTAINS REGISTRATION AND STATEMENT

Name: _____ Home Phone: _____
Address: _____ Birthdate: _____
_____ Social Security: _____
Employer: _____ Work Phone: _____
Co-Captain: _____ Harpooner: _____

Other Crew Members: (At least 5 members)

Weapons and Bomb Markings Used: STATEMENT

_____ have the following equipment that I use for Subsistence whaling;
(Name of Whaling Captain)

Darting Guns; _____ Lances; _____
Harpoon; _____ Shoulder Guns; _____

In addition to the above, I also have the necessary gear and provisions with which to conduct the subsistence hunt.

I ALSO UNDERSTAND THAT THE ALASKA ESKIMO WHALING COMMISSION (AEWC) HAS DETERMINED REGULATIONS FOR THE SUBSISTENCE HUNTS OF THE BOWHEAD WHALE. I AGREE TO ABIDE BY THE (AEWC) MANAGEMENT PLAN. I WILL INFORM MY CREW MEMBERS OF THE (AEWC) MANAGEMENT PLAN. I WILL STOP WHALING WHEN THE VILLAGE QUOTA HAS BEEN MET.

SIGNATURE: _____ DATE: _____

CERTIFICATIONS: (AEWC OFFICE USE ONLY)

_____ hereby find that this Whaling Captain has met
(Village Association President/AEWC Commissioner)

All requirements for Registration and Certification as an AEWK Whaling Captain.

_____ AEWK Corporation Secretary/Executive Director Date: _____
