



JANET T. MILLS
GOVERNOR

STATE OF MAINE
DEPARTMENT OF MARINE RESOURCES
21 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0021

PATRICK C. KELIHER
COMMISSIONER

MONHEGAN LOBSTER CONSERVATION AREA REGISTRATION FORM

To become registered for the Monhegan Lobster Conservation Area, this form must be appropriately filled out and returned to the Department of Marine Resources at the above address between **June 26th and August 1st of each year**. According to regulation, Chapter 25.95 (F)(3), the Commissioner may not certify a person as eligible if the reporting requirement is not met.

I, _____ was a Monhegan Island registrant and
(fisherman's name printed)
harvested lobster in the prior open season.

I, _____ was a Monhegan Island registrant and did not
(fisherman's name printed)
harvest lobster in the prior open season due to a documented illness or medical condition.

I, _____ hereby notify the Commissioner that I no
(fisherman's name printed)
longer wish to be registered to fish in the Monhegan Lobster Conservation Area.

I, _____ document that I am a lapsed registrant and
(fisherman's name printed)
wish to have my name placed on the apprenticeship registry.

I, _____ have completed the Monhegan Apprentice
(fisherman's name printed)
Program and upon notification by DMR that I am eligible, wish to become a Monhegan Island registrant.

Registrant's Signature _____ Date _____
(Parent or Guardian for minor children)

Notary Public _____ My Commission expires _____