

# NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

## Division of Forest Protection

625 Broadway, 3rd Floor, Albany, New York 12233-2560

P: (518) 402-8839 | F: (518) 402-8840 | [Rangers@dec.ny.gov](mailto:Rangers@dec.ny.gov)

[www.dec.ny.gov](http://www.dec.ny.gov)

Dear Licensed Guide:

Your New York State license to guide is due to expire soon. If you would like to continue guiding in New York State, you must renew your license. Your new license is valid for 5 years. **You must also keep your First Aid and CPR current throughout the 5 year duration of your license.**

The renewal process consists of the following procedures:

1. Fill out completely the enclosed New York State Licensed Guide Renewal Application.
2. Submit current required documents and certification cards with the renewal application (copies of fishing and/or hunting licenses are accepted). Copies of your first aid and CPR cards or certificates will be made and the originals will be sent back to you. A list of acceptable first aid and CPR courses is available on the DEC website. The website is [www.dec.ny.gov](http://www.dec.ny.gov). **On-line certification courses of any type are not accepted.**
3. Submit a completed physician statement which is signed and dated no more than 30 days prior to the submission of the renewal application. This must be on the Department form enclosed and must be an original. **Copies are not accepted.**
4. Submit the appropriate license renewal fee: Cash not accepted; **CHECK OR MONEY ORDER MADE PAYABLE TO NYSDEC**

For license renewal of a single category: \$100.00

For each additional category: \$20.00. Rock and Ice Climbing are considered one category for fee purposes. Whitewater rafting, canoeing and kayaking are also considered one category for fee purposes

**THERE IS NO CHARGE FOR BOATS AND CANOES**

Please submit all proper paperwork to this office no later than 30 days following the expiration date of your current license.

Sincerely,



Colleen Kayser

Licensed Guide Program Specialist



Department of  
Environmental  
Conservation



NEW YORK STATE  
LICENSED GUIDE RENEWAL APPLICATION

1. Legal Residence Address:

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

(\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

NYS County of Legal Residence: \_\_\_\_\_

2. Business Name and Address: (If applicable)

Business Name: \_\_\_\_\_

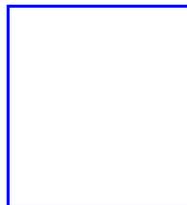
Street: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ Color of Eyes: \_\_\_\_\_

Height: \_\_\_\_\_ Sex \_\_\_\_\_

Include a recent **full-face color photo** trimmed to fit this box one inch by one inch (1" x 1").  
**(No hats or sunglasses).**



4. Check categories of guiding activities being renewed:

Fishing _____	Whitewater Rafting _____	Tier I Rock _____
Camping _____	Whitewater Canoe _____	Tier I Ice _____
Hiking _____	Whitewater Kayak _____	Tier II Rock _____
Hunting _____		Tier II Ice _____

5. Will you use boats or canoes in your guiding business? \_\_\_\_\_



6. The following **MUST** be submitted with this application.

- 6.1 Proof of Identity  
(ex: copy of valid driver's license)
- 6.2 Current **Colored** Photo 1x1
- \* 6.3 American Red Cross Standard First Aid (or acceptable equivalent)  
**(Must be original card or certificate. A copy will be made and the original will be returned). If a certificate was emailed you can send a copy.**
- \* 6.4 CPR (a list of accepted courses can be found on the DEC website)  
**(Must be original card or certificate. A copy will be made and the original will be returned). If a certificate was emailed you can send a copy**

**A LIST OF ACCEPTABLE EQUIVALENTS CAN BE FOUND ON THE DEC WEBSITE**

- \* 6.5 American Red Cross Basic River Canoeing Instructor Certificate or Acceptable Equivalent  
(Only if whitewater canoeing activity is checked in Item 4)
- \* 6.6 American Red Cross Basic River Kayaking Instructor Certificate or Acceptable Equivalent  
(Only if whitewater kayaking activity is checked in Item 4)
- \* (Copy both sides of cards and/or license)
- 6.7 Physician Statement  
**(Must be on the Department form with ORIGINAL physicians signature -- Copies not accepted)**
- \* 6.8 NYS Hunting License (only if hunting activity is checked in Item 4)
- \* 6.9 NYS Fishing License (only if fishing activity is checked in Item 4)
- 6.10 The appropriate license renewal fee

I have attached a postal money order or check payable to the "Department of Environmental Conservation" representing the total license renewal fee and understand that it will be returned to me only if I am declared to be ineligible for licensing at this time or the application is not acceptable.

"I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law."

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Signature

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Date

**RETURN APPLICATION TO: NYSDEC, 625 Broadway, 3<sup>rd</sup> Floor, Albany, NY 12233-2560, Attn: Guides License Unit**



## MEMORANDUM

TO: Physician

FROM: New York State Department of Environmental Conservation

SUBJECT: Guide License Applicant's Physical Ability

\_\_\_\_\_, being an applicant for a license to guide pursuant to Environmental Conservation Law, Section 11-0533 and Title 6 of the New York Codes, Rules, and Regulations, Part 197, is required to provide this Department with a statement of physical ability, signed by a Licensed Physician, Physicians Assistant or Certified Nurse Practitioner. The statement is intended to attest to the fact that the applicant has been found to be physically able to engage in the activities necessary to the holder of a license to guide.

If you find that the applicant has a physical defect or condition which reasonably could affect the ability of the applicant to carry out the responsibilities of a guide, your statement of physical ability should contain a caveat or recommendation for limiting the scope of the license. This should take the form of a restriction, similar to a restriction on a driver's license.

It is important to keep in mind that a condition which might pose a threat to the health and well-being of the guide also threatens the person(s) being guided. Should a guide become disabled, and unprepared, a dependent client might be left to fend for him or herself in an unfamiliar and possibly hostile environment.

The above-named individual is applying for a license to guide for the following activities:



## GUIDE ACTIVITY DESCRIPTION

### **Hunting, Fishing, Hiking, and Camping Guides**

Guides in these four categories may escort parties through wildland areas which may include hilly or mountainous topography. They may walk long distances, up to fifteen miles per day, and carry substantial weights in a backpack. The weight carried will vary but may be as much as seventy-five pounds. Minimum physical requirements for these activities would be as follows:

Hunting, under most circumstances, will require the guide to walk several miles. An exception would be for waterfowl hunting where a boat is used.

Fishing guides may limit their activities to bodies of water where they use boats and little or no walking or carrying is necessary. Others may guide to remote streams or ponds which requires walking long distances over rough terrain.

To carry out the responsibilities of a hiking or camping guide, the applicant should be generally free of any physical defect or disability which would put the guide or a person being guided in jeopardy due to the exertion of climbing slopes, walking long distances, and carrying heavy loads. The exceptions to this would be if the use of boats, canoes, or horses are used for transportation.

### **Whitewater Canoeing and Rafting and Rock and Ice Climbing**

Applicants for these two activities engage in very hazardous and strenuous activities with the potential for emergencies and life-threatening situations being relatively commonplace. Guides for both activities should be fit and capable of periods of great exertion. They must also be able to assist in rescue efforts which may include lifting, climbing and carrying over very rough terrain.



NEW YORK STATE  
Department of Environmental Conservation

PHYSICIAN'S STATEMENT OF PHYSICAL ABILITY TO GUIDE

Name of Guide License Applicant \_\_\_\_\_

The aforementioned, being an applicant for a New York State License to Guide for the following activities,

_____	_____
_____	_____
_____	_____

has been examined by me with the following results:

\_\_\_\_\_, (is) (is not) physically able to carry out (all) (only those activities indicated below)

Restrictions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Physician (printed or typed)

\_\_\_\_\_  
Physician License Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Physician's Address: \_\_\_\_\_  
\_\_\_\_\_

Physician's Phone: \_\_\_\_\_