|  |  |  |
| --- | --- | --- |
| **$ 200.00 Per Band Member** | **Thunderchild First Nation**  **Box 600**  **Turtleford, SK.**  **SOM 2YO**  **Ph: 306-845-4300**  **Fax: 306-845-3230** | **Website: www.thunderchild.ca**  **Email:**  **pcd@thunderchild.ca** |

**Band Membership Assistance Distribution**

**PAYMENT TO AN INDIVIDUAL**

**I**, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print Name) being a Citizen of the Thunderchild First Nation Indian Registry # **349 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** acknowledge receipt of the sum of $ \_\_\_\_\_\_\_\_\_\_\_\_ which represents payment to as a Citizen of the Thunderchild First Nation.

**I**, represent that I am a Citizen of the Thunderchild First Nation and that I am entitled as a Citizen of Thunderchild First Nation to receive these funds.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_this \_\_\_\_\_\_day of December, 2022.

|  |  |
| --- | --- |
| **Banking Information for Direct Deposit:**  **Name of Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Name on Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Institution Number: \_\_\_\_\_\_\_\_\_\_\_\_(3 or 4 digit number)**  **Transit Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(5 digit number)**  **Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **-OR\_ You can request a Routing letter/direct deposit information letter from your banking institution for accurate information.** | **- OR- if requesting by Mail:**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Street/Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Gift cards will be available for Urban band members. You must provide a utility bill with name and address in order to receive a GIFT CARD.**

**Payments will be issued Fridays, starting early January.**

Please MAIL, EMAIL, FAX or HAND DELIVER to the above ADDRESS.

Check one for identification provided:

Health Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver's License: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If applying by mail, email or fax it is MANDATORY that you provide a photocopy of your identification.

# **PLEASE NOTE: DEADLINE FOR PCD PAYMENT IS MARCH 31, 2023**