



## THUNDERCHILD FIRST NATION

### Per Capita Distribution – Payment to Individual/Caregiver for Minor (On-Line)

Box 600, Turtleford, SK S0M 2Y0 | Ph: (306) 845-4300 | Email: PCD@thunderchild.ca

**Deadline to apply March 31<sup>st</sup>, 2026**

Full Name of Adult Citizen & Status Number: \_\_\_\_\_

I declare that the information provided is true and that I am entitled as a Citizen of Thunderchild First Nation (or as a caregiver authorized on behalf of a minor Citizen) to receive this \$300.00 Per Capita Distribution.

#### MINOR INFORMATION (if applicable)

#### Proof of CTB

1) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

2) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

I, \_\_\_\_\_, am the Parent/Guardian/Caregiver of the above-named minor(s) or level of care individual and am authorized to receive this \$300.00 payment on their behalf.

*\* Space for additional Minors on Page 2*

ACCEPTABLE IDENTIFICATION TYPE	
PHOTO	NON-PHOTO
Driver's Licence	Health Card
Provincial ID Card	Birth Certificate
Passport	TCFN Letter of Verification
Status Card	
Possession and Acquisition Licence	
Canadian Military ID Card	

**Adult Citizen or authorized Parent/Guardian/Caregiver:** Two (2) pieces of valid Government issued ID required, at least one must be a photo ID.

**Minors:** One (1) piece of valid Government issued ID required **AND** the Child Tax Benefit notice/assessment listing both the minor's name **and** the Parent/Guardian/Caregiver's name.

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Signature (Citizen / Caregiver): \_\_\_\_\_ Witness Signature: \_\_\_\_\_

Signed at: \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 2026.

### ADDITIONAL MINOR INFORMATION (if applicable)

### Proof of CTB

3) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

4) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

5) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

6) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

7) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

8) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

9) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

10) Minor's Full Name & Status Number: \_\_\_\_\_ ☐ Yes ☐ No

To receive a direct deposit payment, you **MUST** submit a bank provided Direct Deposit slip or void cheque with the account in the name of the adult citizen or the authorized parent/guardian/caregiver, **no alternative account names will be accepted.**

Or

A cheque will be held for pickup and issued upon receipt of the adult citizen or authorized parent/guardian/caregiver's signature. Alternatively check the box below to have the cheque mailed to the address on Page 1.

☐ Mail Cheque via Canada Post

**EMAIL YOUR COMPLETED APPLICATION TO [PCD@thunderchild.ca](mailto:PCD@thunderchild.ca)**  
**OR**  
**HAND DELIVER TO BAND OFFICE RECEPTION**

*Thunderchild First Nation has taken all reasonable steps to ensure that payments are made only to legitimate Citizens or their authorized caregivers. By accepting this payment, the recipient acknowledges that Thunderchild First Nation bears no liability for, and is indemnified against, any loss, misuse, or dispute arising from the spending, transfer, or management of these distributed funds.*