

Thunderchild First Nation Box 600 Turtleford, SK. SOM 2YO Ph: 306-845-4300 Email: PCD@thunderchild.ca

Christmas 2024 Per Capita Distribution PAYMENT TO MINOR INDIVIDUAL Deadline to apply March 31st 2025

		<u>*</u>
I acknowledge that,		Status #: 349
		owledge receipt of the sum of \$250.00 which represent
It is MANI	DATORY that you provide	a photocopy for each of the following:
	• •	the authorized parent/guardian's PHOTO ID
_	_	the minor and the authorized parent/guardian.
	IDENTIFICA	TION TYPE
РНОТО		NON-PHOTO
Driver's licence		Health Card
Provincial ID Card		Birth Certificate
Passport		Letter of Verification
Status Card		
Possession and Acquisition Licence		
Canadian Military ID	O Card	
	ayment, you MUST submi	YES or NO t a bank provided Direct Deposit form with the account
in the name of the authorized	<u>r parent/guardian</u> , no aitem C	ative account names will be accepted.
A cheque will be issued as Alternatively, the cheque can	nd held for pickup upon	receipt of the authorized parent/guardian's signature
Address:		
City, Province:		
Postal Code		
I, represent that the above na of Thunderchild First Nation		he Thunderchild First Nation and is entitled as a Citizer
Parent/Guardian Signature:		Parent/Guardian Print:
Witness Signature: Witness Print:		Witness Print:

Signed at: ______, this _____ day of ______ 2025.