

2017 Aa'tuu Distribution Form

First Name: _____ Middle Initial: _____

Last Name: _____ Birthdate: _____/_____/_____

Ehattesaht Status #: 634 _____ Month Day Year

Mailing Address: _____ (Has your mailing address changed from last Year: Yes No)

City: _____

Postal Code: _____

Phone Number: () _____ (Had your phone number changed from last year: Yes No)

Cell Number: () _____

Email Address: _____ (Has your email address changed from last year: Yes No)

Payment Method:

_____ Check to be mailed

_____ Gift Card

_____ Direct Deposit _____

Institution

Transit

Account Number

Name on Bank Account holder: _____

Has your banking information changed from last year: Yes No

Please note deposits will only be made for the bank account holder. We will not make 3rd party deposits.

Legal Guardian First Name

Last Name

Signature of Applicant/Legal Guardian

Date

Only parents with legal guardianship may sign on behalf of minor; defined as child under the age of 19 years. Payments for Children in Care will be made payable to the child and held in trust. Any person found to be wrongfully applying for distribution on behalf of minor children will be disqualified for future payments, until the amount that was issued is fully recovered.

Please note: The office staff receive an overwhelming amount of calls, thus the quickest way to receive a response is to send your questions to ehattesaht.office@ehatis.ca. The deadline to have forms into the office is December 15th, 2017, any forms received after the 15th, will not be processed until after the holidays.