

Please Indicate: Pick up:  Mail Out:

Please provide a copy of current ID for pick up and mail out

**SECTION 1: Personal Information**

Registered Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Town: \_\_\_\_\_  
 Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Treaty # 436- \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**SECTION 2: Dependent Claim**

Dependent Children: Yes  If yes please complete Section 2.1 AND the  
 Indemnity form (attached)  
 NO

**Section 2.1**

	Last Name	First Name	Treaty Number
1			
2			
3			
4			
5			

**Section 3: Waiver of Liability**

I, \_\_\_\_\_; hereby confirm that the above-mentioned information is correct and I understand I will be held responsible for fraudulent action if the above information is found to be incorrect up to and including criminal charges.

Claimant Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Administration Use Only**

Cheque Distributor Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Cheque Number: \_\_\_\_\_ Date: \_\_\_\_\_ Table: \_\_\_\_\_

# Piikani Nation's Guardians' Acknowledgement of responsibility and indemnity form

This acknowledgement of responsibility and indemnity is given by:

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

Address: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

1. This acknowledgement of responsibility and indemnity relates to the said minor:

Name: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day/Month/Year

2. Please check off one of the following categories which pertains to you and the above said minor:

- The said Minor's Mother or Father,
- CPH /Social Development, Associated,
- Child and Family Services, Associated,
- Appointed Guardianship by a court order,
- Other \_\_\_\_\_ (please specify),

### **\*Please attach updated documentation\***

3. I have the power and responsibility to make day-to-day decisions affecting the said minor.
4. I request that the Piikani Nation Chief and Council ("Chief and Council") deliver to me, to hold as a trustee for the minor, monies in the total value of \$ 250.00.
5. I will use or expend the monies only for the minor's benefit.
6. When the minor reaches the age of 18 years, I will provide a full accounting to the said minor.
7. Further, and in consideration of the Chief and Council's delivery of the monies to me, I hereby agree to indemnify and hold harmless Piikani Nation and Chief and Council from any proceeding brought by the minor or any other person with respect to any matters relating to the management, use, or expenditure of the monies delivered to me under paragraph 4.

Guardians' signature: \_\_\_\_\_

Date: \_\_\_\_\_