



Takla Nation (TN) COVID-19 Assistance Application Form

Given Name and Last Name (as it appears on your government issued ID or Status Card)	
Alias (if any)	
Date of Birth	
Status No.	
Residence (Please tick one)	On-Reserve <input type="checkbox"/> Off-Reserve <input type="checkbox"/>
Current Address (Please include City, Province, and Postal Code)	
Is this a permanent residence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
E-mail	
Phone	
Do you have dependents under the age of 19 living in your household? If yes, please list their names.	
Do you have direct deposit set up with Takla Nation?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Is the bank account active? Yes <input type="checkbox"/> No <input type="checkbox"/> Please attach a copy of void cheque or appropriate banking information for our records. If No, Please choose an alternative payment method. Cheque <input type="checkbox"/> Other <input type="checkbox"/>

