

2025 Piikani Nation Per Capita Distribution Claim Form



Please Indicate: O Pick up O Mail out		
Please provide a copy of current Government Identification.		
SECTION 1: Personal Information		
Claimant Name:		
Address:		
City/Town: Province:		
Country: Postal/Zip Code:		
Date of Birth: Treaty # 4360		
Contact Number: Email:		
SECTION 2: Dependent Claim		
Are you claiming Per Capita Distribution for Dependent Children? SECTION 2.1: If Yes, please complete Section 2.1 AND the Indemnity Form (attached).		
Last Name First Name Treaty Number		
1 2 3 4 5		
SECTION 3: Waiver of Liability		
I,		
Claimant Signature Date		
For Administration Use Only Cheque Distributor (Print Name): Signature:		
Cheque Number: Date:		

EMAIL SUBMISSIONS: distribution@piikanination.com







*Please fill out one (1) Guardian's Acknowledgement of Responsibility and Indemnity Form per Dependent.

Tł	nis acknowledgement and indemnity is given by:	
Guardian Name:		
Address:		
	ovince: Postal Code:	
1.	This acknowledgement of responsibility and indemnity relates to the said minor: Dependent name:	
	Dependent birthdate:	
2.	Please check off one of the following categories which pertains to you and the above said minor:	
	O The said minor's Mother or Father	
	O Child and Family Services, associated	
	O 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 said minor.	
4.	I request that the Piikani Nation Chief and Council deliver to me, to hold as a trustee for the minor, monies in the total value of \$575.00.	
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 person with respect to any matters relating to the management, use, or expenditure of the monies delivered to me under paragraph 4.	
Gu	ardian's Signature: Date:	