



# Gitxaala Nation Back to School Initiative

2024-2025

Date Submitted:

MM/DD/YYYY

For Gitxaala student returning in school in the 2024-2025 School Year  
Pre- K - Grade 12 / Ages 4 - 18

Full Legal Name (Mother)

Full Legal Name (Father)

Primary Caregiver

Mother's Status Card

Father's Status Card:

Caregiver - Status Card, if applicable

Mailing Address:

Apartment #

Street Address

City:

Province:

Country

Postal / Zip Code

Contact Phone Number

Email Address

Dependants Information:

	Child Name	Gender	School Attending	Grade	Birthdate (MM/DD/YYYY)	Age	Status Number
1							672
2							672
3							672
4							672
5							672

Please Check Payment type

Cheque:

Direct Deposit:

**\*\*\*\* MUST \*\*\*\***

**Attach direct deposit / void cheque**

For any additional questions or information,  
please contact: Helen Gladstone at  
adminassistant@gitxaalanation.com  
Or phone: 250-624-2422

Signature: \_\_\_\_\_

Office Use Only

Received By:

Date Received: