



WIKWEMIKONG UNCEDED INDIAN RESERVE

(Wiikwemkoong Unceded Territory)

RELEASE AND DISCHARGE FORM

Robinson Huron Treaty Settlement

INSTRUCTIONS

To help ensure that you are properly inputting information onto the Wikwemikong Unceded Indian Reserve Robinson Huron Treaty Settlement Release and Discharge Form, please follow the instructions below. If you need additional assistance, please contact WUT's RHT Coordinator (705) 859-3122.

Section 1

- Your Full Name as it Appears on your Certificate of Indian Status (Status Card) must be provided.
- Address: Include Street Number, Street Name, Apt /Unit #, P.O Box (if applicable), City, Province/State/Territory, Country, Postal Code
 - ALL address information must be provided
- Primary Phone #: You must provide a phone number with AREA CODE in case WUT Administration needs to contact regarding personal information provided
- Alternate Phone #: (*Optional*) You can provide another phone number in case WUT Administration cannot reach you through your Primary Phone #.
- Email: Please ensure you are entering your email address accurately. (upper or lower case and special characters and numbers, if any)
- Certificate of Indian Status # (10 digits): Please include the full number. All Wikwemikong Band Members' Certificate of Indian Status numbers begin with 175. ALL 10 digits on our card MUST BE INCLUDED.

Section 2

Please ensure ALL Dependent information is as it appears on your Dependent's Certificate of Indian Status.

A Dependent is a person, in which you have legal guardianship, who is under the age of 18 years old. If you need to include more names of dependents, please attach a separate page following the same listing guidelines as required on the Form (Dependent Name, Dependent Date of Birth, Dependent Certificate of Indian Status #, Parent/Legal Guardian Name).

Section 3

This Section is very important as this tells us which method of payment you are choosing to receive your PCD. Please attach a Void Cheque or Bank Direct Deposit Form to the email if submitting electronically.

Section 4

This Section, by your personal signature or as signature as Power of Attorney, acknowledges and authorizes the Per Capita Distribution (PCD) to you or individual you represent as you indicated in the Form. By signing this Form, you also declare that you release and discharge Wikwemikong Unceded Indian Reserve (their heirs, executors, administrators, estate trustees and assigns) from any claim in respect of the said PCD, once received.

You must have a Witness Signature in order for the Form to be considered complete.

When this form is completed, please save the Form, and email this Form, along with the following mandatory attachments to the appropriate email address: RHT@wiikwemkoong.ca

- One (1) piece of Government-issued Photo Identification,
- Void Cheque and/or Direct Deposit Form,
- and Living Power of Attorney-POA (if applicable)



WIKWEMIKONG UNCEDED INDIAN RESERVE (Wiikwemkoong Unceded Territory) **RELEASE AND DISCHARGE FORM**

Robinson Huron Treaty Settlement

You **MUST** be 18 YEARS OF AGE OR OLDER to complete this form.

YOU ARE ELIGIBLE FOR RHT PAYMENT IF YOU MEET THESE REQUIREMENTS:

- Registered WUIR Band Member and alive on September 9, 2023
- Entitled to be registered to WUIR and alive on September 9, 2023
- Entitled babies born between September 9, 2023 up to (and including) January 18, 2024.
- All entitled WUIR Band Registrations initiated ON or BEFORE June 10, 2024

SECTION 1: PERSONAL INFORMATION

Full Name as it Appears on your Certificate of Indian Status (Status Card)

Address: *(street #, street name, city/community, province/state, country, postal/zip code)*

Primary Phone #:

Alternate Phone #:

Email:

Certificate of Indian Status # (10 digits):

SECTION 2: DEPENDENT INFORMATION (Please add separate sheet for more names if required)

FULL Name as it appears on Status Card	Date of Birth as it appears on Status Card	Status Card Number (FULL 10 digits)	Parent/Legal Guardian Name

Children's information is only to ensure accuracy on the Minors' List.

SECTION 3: BANKING INFORMATION

How would you like to receive your payment? Check the box below. ****Please provide YOUR NAME AS IT APPEARS ON YOUR BANK ACCOUNT:**

Direct Deposit Cheque by Registered Mail

For Direct Deposit, please attach either: (please check one)

VOID CHEQUE:

BANK DIRECT DEPOSIT FORM:

SECTION 4: DECLARATION

I hereby acknowledge and authorize the delivery of my Per Capita Distribution (PCD) entitlement from Wikwemikong Unceded Indian Reserve as indicated above in full satisfaction and payment of my entitlement from the Robinson Huron Treaty (RHT) Settlement.

Further, I declare that in consideration of the receipt of the PCD that I do hereby, by my signature forever Release and Discharge Wikwemikong Unceded Indian Reserve (Wiikwemkoong Unceded Territory) in full satisfaction any payment of my (PCD) entitlement, being made from the First Nation, their heirs, executors, administrators, estate trustees and assigns of and from any claim in respect of the said PCD.

Signature **MUST** be your authentic original signature and **NOT** a computer-generated signature. If you need to print to sign, please ensure you **SCAN** or take a photo of your completed form. Email **ALL** your banking information, one (1) photo ID (with visible signature) and this completed form to:

RHT@wiikwemkoong.ca

You must have a Witness Signature in order for the Form to be considered complete.

Signature:

Date:

Please check this box if you are completing this Form as a Power of Attorney

Witness Signature:

Witness Full Name (please print)

Date