



# WHITEFISH RIVER FIRST NATION

## Gym Membership Fund Policy

### **Purpose**

The Whitefish River First Nation Gym membership fund was established from the Niigaan Naabidaa Trust Annual Income to provide registered band members who require financial assistance for gym membership to promote the health and wellness of all members.

*Approvals are subject to the availability of funds*

### **Eligibility Criteria**

The Whitefish River First Nation Gym Membership fund criteria apply:

1. Registered Whitefish River First Nation Band Member;
2. Receipts for Gym membership to receive reimbursement;
3. Eligible expenses must be applied to the fiscal year (April to March) in which the expenses were incurred.

### **Process**

1. The “Whitefish River First Nation Gym fund application” form must be completed, provide copy of status card and receipts for reimbursement.
2. Applications are to be submitted to:

#### **Gym Membership Fund**

Whitefish River First Nation

17 A Rainbow Ridge Road

Birch Island, ON P0P1A0

Phone: (705) 285-4335

Fax: (705) 285-4532

[trust@whitefishriver.ca](mailto:trust@whitefishriver.ca)

### **Maximum Coverage**

The maximum coverage per eligible applicant is \$500.00.



## Whitefish River First Nation Gym Membership Fund Form 2023

<b>Applicants Name:</b>			
<b>Birth Date:</b>			
<b>10 Digit Band #</b>			
<b>Address:</b>			
<b>Phone:</b>			
<b>Email:</b>			
<b>Please check off that you have included the following:</b>			
<b>Copy of Status Card:</b>		<b>Receipts:</b>	

**Direct Deposit:** Proper Bank slip is required, otherwise a cheque will be automatically mailed out.

By signing this form, you hereby give permission for the Whitefish River First Nation Membership Clerk to verify your membership with Whitefish River First Nation (WRFN). By signing this form, you also agree that WRFN may use your contact information to communicate with you.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

**Application Checklist: Below is to be completed by Whitefish River First Nation Administration Staff**

Requirements			
Status Card:	<b>Yes</b>	<b>No</b>	
Receipts provided:	<b>Yes</b>	<b>No</b>	
Direct Deposit provided:	<b>Yes</b>	<b>No</b>	
Application received by:	<b>Fax</b>	<b>Email</b>	<b>Mail</b>
Date Application received:			
Date Application processed:			