 

**Nuchatlaht**

**P.O. Box 40, Zeballos B.C.**

**V0P 2A0**

**Phone: 250-332-5908**

**Fax: 250-332-5907**

**APPLICATION FORM
Nuchatlaht Food Fish Program**

**Applicant Information \*All fields required.**

|  |
| --- |
| **Full name:**  |
| **Date of birth:**  |
| **Street address:**  | **City:**  |
| **Province:**  | **Postal code:**  |
| **Email address:**  |
| **Telephone:**  |
| **Please indicate preferred method of communication:**  | [ ] **Email** | [ ] **Phone** | [ ] **Mail** |
| **Are you applying on behalf of other adult (18+) Nuchatlaht members residing with you?** **If yes, please provide:** **Full name(s):** **Date of birth(s):** **Your relationship to this/ these individual(s):**  |

**Application continued on next page...**

**Applicant Preferences**

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| **Preferred Pick-Up Location *(Check One)*** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Oclucje**[ ]  | **Campbell River**[ ]  | **Nanaimo**[ ]  | **Victoria**[ ]  | **N/A**[ ]  | [ ] **Other** *(please specify)*   |

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|  **Preferred Pick-Up Time** |

|  |  |  |
| --- | --- | --- |
| **Morning/Early Lunch** [ ] 9:00AM to 11:00AM | **Lunch/Early Afternoon** [ ] 11:00AM to 3:00PM | **Late Afternoon/Evening** [ ] 3:00PM to 6:00PM |

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| **Species Preferences***\*please note: not all listed species are available at all times, this is to determine demand and preference\** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Salmon***(suuha)* | **Chinook** [ ] *(spring salmon)* | **Coho** [ ] *(cuw̓it)* | **Chum** [ ] *(hink̓uʔas)* | **Sockeye** [ ]  |
| **Groundfish** | **Halibut** [ ] *(p̓ooʔi)* | **Sea Urchins** [ ] *(t̓uc̓up)* | **Herring Roe** [ ] *(k̓ʷaqmis)* | **Full Herring** [ ] (ƛusmit) |

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| [ ] **Other** *(please specify)*  |

**Applicant Signature**

\*Please initial each following statement

 I confirm that I am a registered Nuchatlaht member.

 I understand that this fish can only be used for personal food, social or ceremonial purposes and is not intended for resale.

Applicant name:

Signature:

Date: