



Mamalilikulla First Nation

168-1436 Island Highway, Campbell River BC V9W 8C9
(ph) 250-287-2955 (fax) 250-287-4655 toll free 1-888-287-2955
patienttravel@mamalilikulla.ca

Procedures:

1. Please request your doctor's office to fax confirmation of your appointment to the band office. 1-250-287-4655
2. Please fill out ALL SPACES of this form; do not leave any blank spaces. INCOMPLETE FORMS CANNOT BE PROCESSED.
3. Please submit this form with appointment confirmation at least 5 working days prior to your appointment.
4. Have the doctor's office sign/stamp the Confirmation of Attendance Form.

Client Information	
Name:	
Date of Birth:	
Status No.:	
Care Card No.:	
Phone No.:	
Address: Street City	
Postal Code	

Appointment Information
Referred by:
Referral Doctor's Phone No.:
Name of specialist:
Specialist's Phone No.:
Specialist Address:
Reason for seeing specialist:
Appointment Date:
Appointment Time:

Travel Information	
Transportation:	<input type="checkbox"/> Bus <input type="checkbox"/> Car <input type="checkbox"/> Other:

Escort Required:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Escort:	
Escort Name:	
Escort Status No.:	
Destination:	
From:	
To:	
Departure Date:	
Time Leaving:	
Return Date:	
Return Time:	
Accommodations Required:	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Please book me a hotel

TERMS:

1. 72 hours' notice is required for hotel cancellations; if no notice is made, patients are responsible for the hotel expense. To cancel a reservation, please contact the patient travel clerk.
2. Ferry receipts must be submitted to the PT clerk – failure to do so will result in ferry reimbursement only for future appointments.
3. If you cancel or change your appointment, please contact the patient travel clerk.
4. If you miss your appointment for which you have received patient travel, you are responsible to return or repay the patient travel funds; you will not be eligible for future patient travel until you do so.
5. I agree to be responsible for all costs over and above FNHA NIHB patient travel authorization.
6. Cheque issue: 2 p.m. the day before the appointment (as long as the patient fully completes and submits this form at least 5 business days before the appointment and there are no unforeseen circumstances).

Signature

Date