Christmas Distribution Children's Trust Fund Request Application Form

Application for Placement of Minor's Funds into Trust

SECTION 1 – CHILD INFORMATION

Child's Full Name	Child's Birthdate (M/D/Y)	Child's Status Number

SECTION 2 – APPLICANT INFORMATION

Applicant's Full Name: _____

Relationship to Child: ☐ Parent ☐ Legal Guardian ☐ Other (specify): _____

Phone Number: _____

Email Address: _____

Mailing Address (if different from child): _____

_____

SECTION 4 – TRUST FUND TERMS

I am requesting that the following apply to the funds:

☐ Funds to be held in trust until the child reaches age 18

☐ Annual statements to be sent to: ☐ Applicant ☐ Child (when age-appropriate) ☐ Both

SECTION 5 – DECLARATION & CONSENT

I understand that by requesting funds to be placed in trust:

- These funds will not be accessible for general use by the parent/guardian.

- These funds will have an annual interest rate of 3%

- The child may have legal rights to access or question use of funds upon reaching maturity.

- Mamalilikulla First Nation will act as trustee in accordance with the terms outlined above.

I hereby declare that the information provided is accurate to the best of my knowledge and that I am legally authorized to make this request on behalf of the child.

Signature of Applicant: _____

Date: _____

☐ Proof of guardianship/parentage attached

☐ Copy of child's birth certificate or ID attached

FOR OFFICE USE ONLY

☐ Application Reviewed

☐ Approved ☐ Denied ☐ Additional Information Required

Notes: _____

Reviewed by (Print Name): _____

Signature: _____

Date: _____