



### Nisga'a Valley Health Authority

4920 Tait Avenue  
New Aiyansh, BC  
VOJ 1A0

F2

## APPLICATION FOR: NISGA'A NON-INSURED HEALTH BENEFITS CARD

Important Note: Please use your registered name when applying for Non-Insured Health Benefits, AND send a copy of your BIRTH CERTIFICATE. For a name change please send a copy of your MARRIAGE CERTIFICATE or your NEW BIRTH CERTIFICATE.

Nisga'a Citizen #: \_\_\_\_\_ (If you do not have a citizen number call Eligibility & Enrollment: 1-888-311-9457 @ Nisga'a Lisims Government). Your application **WILL NOT** be processed until we have an Citizenship Number.

Status Number: \_\_\_\_\_ Band: \_\_\_\_\_  
(If you do not indicate which band you are registered with, or which band you will be registering with, this will delay the process of your application)

NEW MEMBER:

REPLACEMENT CARD:

CHANGE OF INFORMATION:

Registered Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Health Care Number: \_\_\_\_\_

CARRIER ID: 11 GROUP #: 051364 GWL #: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

#### ADDITIONAL INFORMATION:

Mother's Name: \_\_\_\_\_  
Last First Middle

Father's Name: \_\_\_\_\_  
Last First Middle

(Office Use Only)

Date Received: \_\_\_\_\_ Date Card Ordered: \_\_\_\_\_