



**Nisga'a Valley
Health Authority**

Nisga'a Health Benefits Application

Date:

New Member Replacement Address Update Only

Full Legal Name: _____

Date of Birth: _____ Gender: Female Male Other

Phone Number: _____ Cell Number: _____

Address: _____ City/Town: _____

Postal Code: _____ Email Address: _____

MSP Care Card Number: _____

Nisga'a Citizen # : _____ If you do not have a citizen number, call eligibility and enrollment at 1-888-311-9457 at Nisga'a Lisims Government.

Status Number: _____ Band Number: _____

(If you do not indicate which band you are registered with, or which band you will be registered with, this will delay the process of your application)

Parents Information Registered with NLG/ Status

Full Legal Name: _____

Status #: _____ NLG #: _____

Full Legal Name: _____

Status #: _____ NLG #: _____

I certify that the information provided is to be true and that I am the subject of the form or an authorized representative.

Signature

Date

Submit to: nisgaabenefits@nisgahealth.bc.ca / FAX: 250-633-2160 / NVHA Reception

Saksgum Gandidils – Healthy Minds, Healthy Bodies, Healthy Spirits

Respectfully,

Nisga'a Health Benefits