



Moose Hunting Assistance Application Form

Department of Culture and Lands Protection

This program is for Tłjchq Government Citizens/ family units (those living in your household) that are able to get out on the land (have your own resources: cabin or tent, transportation, sleeping gear, camping gear, etc.).

INSTRUCTIONS: Please fill out the form on your computer, save it, and send it as an attachment in an email to your community director. For people that you know who don't have internet, or are not able to access this form, please reach out and help them to complete this form and send it in on their behalf. Please call numbers below to get support on completing application forms. **Application in-take ends on October 20 at 1:00PM.**

Application Process:

Application intake: Monday to Wednesday (each week)

Application Review: Thursday mornings

PO's issued: Thursday - **Afternoon** and Fridays

Once your completed application has been received, reviewed and you are given a call back saying your application is complete and approved, a PO will be issued to your local gas station and grocery store for a total allotted for your community for moose hunting (please note that gas rates are different in each community):

Wekweèti	30 gallons of gas = \$ 220 gas + \$ 150 groceries = \$ 370.00
Whatì	30 gallons of gas = \$ 210 gas + \$ 150 groceries = \$ 360.00
Whatì	30 gallons of gas = \$ 155 gas + \$ 150 groceries = \$ 305.00
Behchokò	30 gallons of gas = \$ 175 gas + \$ 150 groceries = \$ 325.00
Yellowknife	30 gallons of gas = \$ 170 gas + \$ 150 groceries = \$ 320.00

If you have been approved to receive assistance from this program, it is **MANDATORY** to provide receipts (names on the receipts) and photos while out on your trip **BEFORE RE-APPLYING** for your next application.

Maximum of two moose harvest assistance given per household; one application per household at a time.

1. Applicant Information

Full Name:	<input type="text"/>	Date of Application	<input type="text"/>
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2. Contact information:

Address:				
House #	PO Box	Community	Province	Postal Code
Phone #:		Email:		

3. Hunting Location & Information

General Hunting License #:	Firearm Acquisition # or PAL:
GPS Coordinates or General Location:	
Will you be staying overnight? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Whose cabin do you plan to be staying at?	

How will you get to your moose hunting location? (truck, boat, quad, ski-doo, walking):
How long does it take to get to your hunting location from the community?

4. Start Date and Return Date

It is up to you how long you choose to be out on the land. This program is to only assist and not intended to cover all costs of being out on the land moose hunting.

Date you are leaving home community:		Date you are returning to home community:	
How many Individuals will be going on the trip? Provide names of the individuals on the hunt from your household:			
1		5	
2		6	
3		7	
4		8	

5. Emergency Contact

RCMP #		Health Centre	
Family Member Name		Family Member Contact #	
Other:		"Other" Contact #	

6. Your Contact Number While You Are On The Land

Cell Phone #		Satellite Phone #		InReach #	
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7. List your Safety Plan details in case you have an Emergency:

(EX: List all your Safety Equipment, how you would handle a bear encounter, your camp fire description and plan for a fire that gets out of control, boat safety, etc.)

8. Your Community Contact Person – Who will you check in daily with while out on the land?

Name of Community Contact		Phone Number of Community Contact:	
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Whether you are in town or in the bush, remember to follow the general COVID-19 safety guidelines:

- regular handwashing or use hand sanitizer
- avoid touching face (eyes, nose, ears and mouth)
- coughing into your sleeve (or into a tissue and discarding)
- practice social distancing
- do not share water bottles, dishes, utensils, and clothing that covers the face.
- stay with your home family unit, do not mingle with other households
- If you are sick, stay home in your community and contact your health center to tell them your symptoms and follow their recommendations.

If you are experiencing any of the COVID-19 symptoms, while out on the land, return to town and get tested for COVID.

COVID-19 symptoms include: Shortness of breath or difficulty breathing, fever, new or worsening cough, generally feeling unwell, abdominal pain, chills, muscle aches, fatigue or weakness, sore throat, congestion or runny nose, headache, diarrhea, nausea or vomiting, loss of sense of smell/taste, skin changes or rashes, loss of appetite.

9. Bear Awareness

Have you reviewed the Bear Awareness?

Yes No

10. Waiver

I will not make any claim or commence any legal proceedings against Tłı̨çhǫ Government and/or its officers, directors, employees, agents and officials for damage resulting from personal injury, illness, death and/or property loss, however arising and sustained by me or my family members as I voluntarily, on my own free will, go out on the land during the COVID-19 epidemic with my family. This includes any damage arising during transportation to and from my camp and any excursions we take in the area around our camp.

I have read the Waiver, understand it and agree. Yes No

Applicant Signature: _____

Applicant Print Name: _____

Date: _____

If you need further assistance with applications, please contact your Local Presence Office. Contact names and numbers are listed below:

Behchokò Residents: **Janita Etsemba**
Tel: (867) 392 6385
Email: BPoreception@tlichoc.ca

Pam Drybones
Tel: (867) 392-6381 ext. 1353
Email: pam.drybones@tlichoc.ca

Cecilia Ashton
Tel: (867) 392-6381 ext. 1317
Email: ceciliaashton@tlichoc.com

Gamètì Residents: **Belinda Blackduck**
Tel: (867) 997 3074 Ext: 1503
Email: BelindaBlackduck@tlichoc.com

Whatì Residents: **Shirley Dokum**
Tel: (867) 573 3012 Ext: 1403
Email: shirleyandokum@tlichoc.ca

Wekweètì Residents: **Cecilia Judas**
Tel: (867) 713 2511 Ext: 1603
Email: CeciliaJudas@tlichoc.ca

Yellowknife Residents: **Cecilia Chocolate**
Tel: (867) 766 4003 (Front Desk)
Email: ykadmin@tlichoc.com

Any Questions related to Families On-the-lands, please call or email your community Director.

Internal Office Use:

Application Approved: Yes No Reason for No: _____

- PO # _____ sent to _____ (Store) on _____ (date)
- PO # _____ sent to _____ (Gas Bar) on _____ (date)