## LUMMI NATION BACK TO SCHOOL CLOTHING APPLICTION FOR 2022-23 SCHOOL YEAR

Student's Name	Lummi Tribal Enrollment #	Date of Birth	Grade for '22-23 School Year		
By checking this box I'm giving my 13 to 18-year-old child permission to pick up their Back to School Gift Card					
Name of School Attending 2022-23 School Year					

Parent/Guardian #1 Parent/		ian #1 Parent/Guardian #2				
Phone #		Phone #				
Email:		Email:				
docun	nentati	odial parent/legal guardian of the student listed on this application, you must provide on the student is legally in your care before we release gift card. people have permission to pick up my student's gift card.				
1.	-	22222				
	DID	OU RECEIVE A BACK TO SCHOOL GIFT CARD FOR YOUR CHILD LAST YEAR				
	YES	If your student received a Back to School gift card for school year 2021-2022 NO supporting documentation are needed, only this application.				
	NO	If your child did not receive a back to school gift card for 2021-2022 school year the following supporting documents will need to be attached to the application before it is processed.				
		Completed application				
		Proof of Lummi Enrollment (copy of Tribal ID or CIB)				
		Proof of 2022-2023 School Year Registration (Copy of school registration or 2022 Spring Report Card)				
		If not the custodial parent/legal guardian of student, you must attach current cour documentation that the student is legally in your care.	rt			

## **Declaration of Eligibility & Permission to Release Information**

By signing I, \_\_\_\_\_, (*print name*) acknowledge that I am the parent(s) or legal custodial guardian, of the Lummi Enrolled student name above. I understand that LIBC will not be liable for lost, stolen or misused gift card. I further acknowledge that I as the custodial parent/guardian assume full responsibility for the gift card and agree to use the card for the sole intended purpose of school clothes and supplies for the student named on this application.

By my signature below, I declare that all the above statements are true and accurate.

Signature Parent/Legal Guardian

Date

This section is for out of Whatcom County Residents who wish to have their students gift card mailed (only fill out if card is to be mailed).

## MAIL GIFT CARD TO THE FOLLOWING ADDRESS

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

City: State: Zip: