

The Yuutu?it?ath Government is pleased to cover accommodation and travel (within Vancouver Island) costs for Yuutu?it?ath Citizens coming home for Yuutu?it?ath Day 2024 for up to a maximum of three (3) nights. Mileage rates and meal allowances will be determined in accordance with the National Joint Council Rates Travel Directive (<https://www.njc-cnm.gc.ca/s3/en>).

Claimant Information

Name (full name of who payment should be made to): _____

Mailing Address: _____

Phone Number: _____

Email: _____

List of Other Individuals Travelling With You

Full Name	Adult/Child	Yuutu?it?ath Citizen
	Adult <input type="checkbox"/> Child <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Adult <input type="checkbox"/> Child <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Adult <input type="checkbox"/> Child <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Adult <input type="checkbox"/> Child <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Adult <input type="checkbox"/> Child <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Travel Details

Departure Date: _____ Return Date: _____ Mode of Travel: Personal Vehicle Bus

Travelling from (physical address): _____

Accommodation Required

Hotel # of Nights (max 3) _____ Check in Date: _____ Check out Date: _____

of Adults _____ # of Children _____ # of beds required _____

Please list any other specific accommodation requests or accessibility requirements:

All hotel reservations will be made by the Yuutu?it?ath Government. A reservation confirmation will be provided to Claimant prior to travel.

*Note: If you will be staying at a private residence and the host of the residence is a Yuutu?it?ath citizen, that host is eligible to receive a hosting allowance by submitting a **Host Allowance Form**.*

Payment Preference (select one)

Electronic Funds Transfer (EFT) <input type="checkbox"/> <i>For EFT, please attach a copy of a void cheque or direct deposit from your bank.</i>	Mail Cheque to Mailing Address <input type="checkbox"/>	Pick up at Cixwatin Centre <input type="checkbox"/>
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Claimant Signature: _____

If you require hotel, please submit your form to Cixwatin Centre Reception / reception@ufn.ca by August 30. Hotel is not guaranteed after August 30. To ensure your payment is processed before September 20, please submit your form by September 17.
Final deadline to submit a Travel Request Form is September 27.