

## PRENATAL/POSTNATAL NUTRITION PROGRAM REGISTRATION

The pre-and post-natal nutrition program provides up to \$100 per month during pregnancy up to 18 months after birth. To be eligible for the program, Citizens or parents of Citizens must live within Tr'ondëk Hwëch'in Traditional Territory.

To register for the program, complete the following form & submit with a doctor's referral to the pre-natal nutrition program. Once you've been notified of your registration, you can use up to \$50 between the 1st-15<sup>th</sup> of the month, and another \$50 on the 15th-end of month. Simply notify the cashier you're on the PO list.

Name:	Partner's	Name <i>(if applic</i>	rable)	
Mailing Address	Phy	Physical Address		
Home Phone	Cell Phone		Work Phone	
Email Address:				
What is your expected delivery date?			your first pregnancy?   yes	; □ no
If this is not your first preg be used to assist in planni	gnancy, please list your children's ng activities for families.	names and ag	es below. This information w	ill only
Child's Name		Date of Birth		
Which is your preferred g	rocery store?   Bonanza Mark	et 🗆 Genera	al Store	
Do you want to receive fo	ood grown at TH Farm, as availab	ole? □ eggs	□ vegetables □meat	
Note: Receiving farm proa	luce will result in reduction of the	amount availa	ble at the grocery store.	
	Please submit compl	eted forms to:		
	nity Health Representative locat or email CommunityHe	_		
	or eman <u>community no</u>		Date	
			Date	
Office Use Only Date received:	¬ Physician Referral received	□ added to PO list	t	
Citizenship confirmed:	Eligibility Ends	Proaram End Rei	minder sent	