



Native Tribe of Kanatak  
P.O. Box 876822 Wasilla, AK 99687  
Office: 907-357-5991 Fax: 907-357-5992

## Eldercare Assistance Program Application

### **Eligibility:**

All members age 60 and over who are currently enrolled in the Native Tribe of Kanatak and apply for the program. Members must apply every year.

### **Program Details:**

This program runs from January through December of each year. Each enrolled member will receive a \$25 WalMart Assistance card on or about the 15<sup>th</sup> of each month to assist with monthly prescription and/or food expenses. The first assistance card will arrive the month following receipt of this application and will continue arrive each month through the remainder of the year. Members must re-apply each December in order to re-enroll for the upcoming year.

Please complete this portion.

<b>Member Information:</b>	Today's Date: ___/___/_____
Name: _____	Phone: ___ - ___ - _____
Current Address: _____	Cell: ___ - ___ - _____
City: _____	State: ___ Zip: _____
email: _____	

Member signature: \_\_\_\_\_ Date: \_\_\_\_\_

Completed applications can be mailed, faxed or emailed to the office.

Native Tribe of Kanatak

P.O. Box 876822

Wasilla, AK 99687

Or faxed to:

1-907-357-5992 / 1-855-KANATAK

Or email to:

tessmcgowan@ymail.com or kanatak@mtaonline.net