## Tohono O'odham Nation COVID-19 Vaccination Incentive Program for Minors



- For fully vaccinated enrolled Tohono O'odham Nation minor members ages 5-11 years old
- Must submit a complete application signed by applicant's parent or legal guardian
- Must provide Tribal enrollment number
- Must present a COVID-19 vaccine card as proof of vaccination
- Must be accompanied by parent or legal guardian when picking up incentive

All eligible members who meet the qualifications for the COVID-19 Vaccination Incentive Program for Minors will receive a non-cash incentive (Subject to age and availability).

For questions regarding the application, please contact DeAnza Anderson at (520) 993-1189 or Drew Stevens at (520) 993-9682

For questions regarding the distribution schedule, please call the Executive office at (520) 383-2028

C	ohono )'odham lation	COVID-19 Vaccination Incentive Program for MinorsMay Distribution Schedule
	May 2	<mark>Gu Achi District: Santa Rosa Basketball Courts</mark> 5pm - 8pm
	May 3	<mark>Schuk Toak District Building</mark> 5pm - 8pm
	May 4	Hickiwan District Multipurpose Building 5pm - 8pm
	May 5	Pisinemo District: San Simon Dance Floor 5pm - 8pm
	May 6	Sells Executive Office Covered Parking Area 5pm - 8pm
	May 7	<b>Casa Grande Rodeo Grounds</b> 7am - 11am
	May 9	<mark>San Lucy District Basketball Court</mark> 5pm - 8pm
	Please fol	low all COVID-19 prevention guidelines

Tohono O'odham Nation	COVID-19 Vaccination Incentive Program for Minors April Distribution Schedule	
April 25	<b>San Miguel Community Building</b> 5pm - 8pm	

**Baboquivari District Office Ramada** April 26 5pm - 8pm April 27 5pm - 8pm April 28 **Sif Oidak District Office** 5pm - 8pm April 29 San Xavier District Dance Ramada 5pm - 8pm April 30 Inter Tribal Council of Arizona, Phoenix 7am - 11am

Please follow all COVID-19 prevention guidelines

Made with PosterMyWall.com



## Tohono O'odham Nation Tribal Member Ages 5-11 Years Vaccine Incentive Program Application

This application is for the *Tohono O'odham Nation Tribal Member Ages 5-11 Years Vaccine Incentive Program.* All eligible members who meet the qualification for the program will receive a Nintendo Switch, Switch Lite, or Amazon Tablet incentive (subject to age and availability) for becoming fully vaccinated against COVID-19. This application is not complete without providing a copy of eligible member's Vaccine Card, which will be used to verify member's vaccine status. Application must be signed by the applicant's parent or legal guardian.

Please fill in the following information:

## **Tribal Member (Applicant) Information**

Name:	Tribal Enrollment #:
District:	Date of Birth:
Phone:	Age:
Address:	City:
State:	ZIP:
Vaccination Information	
Type of Vaccine:	
Vaccination Dates	
First Dose:	Second Dose (Pfizer or Moderna):

By my signature below, I certify that the information provided above is, to the best of my knowledge, true and accurate. In addition, the Vaccine Card I submit in conjunction with this application is authentic, provided to applicant by a healthcare professional as documentation of receiving a COVID vaccine. I hereby acknowledge that intentionally falsifying information or documentation is considered an act of fraud. All vaccine cards are endorsed with official government agency seals. The unauthorized use of an official government agency's seal (such as HHS or the Centers for Disease Control and Prevention (CDC)) is a crime, and may be punishable under Title 18 United States Code, Section 1017, and other applicable laws. Any suspicious vaccine cards will be reported to the FBI for further investigation.

Parent/Legal Guardian Name:\_\_\_



## Tohono O'odham Nation Tribal Member Ages 5-11 Years Vaccine Incentive Program Application

Relation to Minor (Mother/Father/Legal Guardian): \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

 OFFICE USE ONLY

 TON Office Verification

 Name:
 Signature:

 Signature:
 Date: