



Garden Hill First Nation Emergency Rapid Response & KHSI Pandemic Services

Garden Hill, Manitoba
R0B – 0T0



Date: _____

PERMISSION FORM TRAVEL TO GARDEN HILL Effective Tuesday, September 1, 2020 to TBA

This form is to be filled out by individuals for travel to Garden Hill to return home and to authorize essential service workers to travel as mentioned in the Critical Emergency Directive II – Step 2: Travel restriction (c, d, e and f.) see attached document.

You are required to fill out this form **as soon as possible** before date of travel. A letter must accompany this form by stating in her/his own words, the reason for travel.

When I enter the community of Garden Hill, **I agree** by signing this form, I will follow and complete the 14-day self-isolation/self-monitoring protocol as stated in Step 3 – Critical Emergency Directive II. If I am recognized as an essential service worker, I will follow the essential workers safety rules.

Name: _____ Phone #: _____

Band & Treaty #: _____ Signed by: _____

Check one or more on what type of reasons for travel:

- | | |
|--|---|
| <input type="checkbox"/> Urgent Family Matters. | <input type="checkbox"/> Court Related Travel |
| <input type="checkbox"/> Bereavement Travel. | <input type="checkbox"/> CFS related travel. |
| <input type="checkbox"/> Returning to Garden Hill (valid reasons only) | <input type="checkbox"/> Essential Services. |

(For office use)

We, the Chief and Council of Garden Hill First Nation (GHFN), Emergency Rapid Response & KHSI Services give:

Permission to travel on: _____

Permission not granted by the panel on: _____ See review form

If there are any questions, please feel free to call the following: Audrey Monias – 204-456-2085, Oberon Munroe – 204-292-8794, and Zack Flett – 204-450-0190. Thank You.

Audrey Monias
Councillor – GHFN

Oberon Munroe
Health Director – KHSI

Zack Flett
Team Leader – ERRT



Garden Hill First Nation
Emergency Rapid Response &
KHSI Pandemic Services

Garden Hill, Manitoba
R0B 0T0



**Critical Emergency Directive II – August 15, 2020
To address STEP 2 – (C, D, E, F) Travel Restriction Process**

1. Write a Letter to: Pandemic Services Review Panel.
2. Fill out the “Permission to travel to Garden Hill First Nation” form for approval 2 days before leaving.
3. If, approved, you will get a permission slip from the review panel.

Forms are available at the www.ghfnhealth.com Website.
Please FAX or Email your completed forms at the Health Centre
for review.

Fax: 204-456-2996

Email: administration@ghfnhealth.com

Review process will take 2 days once completed form has been
submitted and must be **2 days** before leaving.