



2019 T'aaq-wiihak Fisher Application

Name (indicate if JR, SR, III etc.)		Nation	
Preferred Name (nickname/traditional name)		Date of Birth (yyyy/mm/dd)	
House Address		Phone	
Mailing Address		Email	
What Vessel(s) do you intend to fish?		Do you own this vessel?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Required Certifications to skipper a commercial vessel (please tick all held)			List other relevant certifications
<input type="checkbox"/> SVOP (Small Vessel Operator Proficiency) <input type="checkbox"/> MED A3 (Marine Emergency Duties) <input type="checkbox"/> ROC-M (Restricted Operators Certificate - Maritime) <input type="checkbox"/> MBFA (Marine Basic First Aid) - specify expiration: <input type="checkbox"/> Stability (<i>recommended for troller operators</i>)			
I AGREE TO THE TERMS AND CONDITIONS OUTLINED IN THE T'AAQ-WIIHAK REQUIREMENTS AND RESPONSIBILITIES AGREEMENT, AND ACKNOWLEDGE SIGNING THIS DOCUMENT UPON BEING GRANTED T'AAQ-WIIHAK DESIGNATION.			Initial
OFFICE USE ONLY			
Fisheries approved for	T'aaq-wiihak Number	Registration Date	
<input type="checkbox"/> Hook and Line <input type="checkbox"/> Nootka <input type="checkbox"/> Ca?inwa <input type="checkbox"/> Taa?inwa	<input type="checkbox"/> Renewal <input type="checkbox"/> New Fisher	Nation Approval	