



MIKISEW CREE FIRST NATION
**APPLICATION FOR
MEMBERSHIP**

APPLICANT

1. Surname of Applicant:

Given Names:

2. Mail Address:

3. Phone Number:

Phone
()

Home
()

Work
()

4. Date of Birth (YYYY/MM/DD):

5. Sex:

Female: [] Male: []

6. Name of Former Band:

7. Former Band No. (If Applicable):

APPLICANT FATHER

8. Surname of Father:

Given Names:

9. Mailing Address:

10. Phone Number:

Phone
()

Home
()

Work
()

11. Date of Birth: (YYYY/MM/DD)

12. Name of Band:

13. Band Number:



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APPLICANTS MOTHER

14. Maiden Name of Mother: _____
15. Given Names: _____
16. Mailing Address: _____

17. Phone Number: Phone () Home () Work ()

18. Date of Birth: (YYYY/MM/DD) _____
19. Name of Band: _____
20. Band Number: _____

GRANDPARENTS

21. Surname of Paternal Grandfather: _____
Given Names: _____
22. Surname of Paternal Grandmother: _____
Given Names: _____
23. Surname Name of Maternal Grandfather: _____
Given Names: _____
24. Surname of Maternal Grandmother: _____

REASON FOR SEEKING MEMBERSHIP

25. Please indicate the reason for seeking membership



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ALL APPLICATIONS MUST BE ACCOMPANIED BY THE FOLLOWING DOCUMENTS

1. A birth certificate of live birth of the applicant must accompany the application
2. Proof of Indian Status of the applicant: to be obtained from the Department of Indian Status.
3. For members applying for their adopted Indian children, proof of adoption must be provided.
4. Applicants may enclose a "letter of reference" which comments upon the character and background of the applicant.
5. For transfers from the other bands, the following information must be provided:
 - a. A letter from Chief and Council of the band certifying that they are a member of the band or
 - b. If the band does not have control of the membership list, a letter from the Department of Indian Affairs certifying that they are a member of that kind.
 - c. A completed copy of the attached sponsor's support of the application for membership form signed by the (3) band members.

Until all necessary information and documents requested in the application are provided to the Chief and Council, the membership application will not be considered.

**MAIL THIS APPLICATION WITH NECESSARY
DOCUMENTS TO P.O BOX 90, FORT CHIPEWYAN,
AB – ATTENTION: CHIEF & COUNCIL**

Chief and Council
Mikisew Cree First Nation
P.O BOX 90
Fort Chipewyan, AB T0P 1B0

CONFIDENTIALITY

All information supplied will be treated in confidence by the band.

DECLARATION & SIGNATURE

I _____ do hereby affirm that the statements and information provided in this application and accompanying documents are the best of my knowledge, true and accurate.

X

Signature of applicant or band member
Parent of the applicant

Date