

**Schedule 1**  
**APPLICATION FOR MEMBERSHIP**

**Form 1**

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|------------------------|----------------|
| Name of the Applicant: | Date of Birth: |
|------------------------|----------------|

**MAILING ADDRESS:**

|                         |                      |           |              |
|-------------------------|----------------------|-----------|--------------|
| Box # or Street Address | City/Town/Settlement | Province: | Postal Code: |
|-------------------------|----------------------|-----------|--------------|

1. Have you ever been a member of a Settlement? YES or NO

If yes, which Settlement were you a member of?

Settlement: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

If more than one place, where else did you reside: \_\_\_\_\_ Length of time: \_\_\_\_\_

2. Have you lived in Alberta for the Five years immediately preceding this date: YES or NO

If yes, where: \_\_\_\_\_ How long did you reside at the current location: \_\_\_\_\_

If more than one place, where else did you reside: \_\_\_\_\_ Length of time: \_\_\_\_\_

3. Are you either an Indian, registered under the Indian Act (Canada) or registered as an Inuk for the purpose of a land claims Settlement? YES or NO

**If yes, answer the following:**

Were you registered under the age of 18 years old? YES or NO Date of Registration: \_\_\_\_\_

Registration Band #: \_\_\_\_\_ Registration at which reserve: \_\_\_\_\_

Registered under parent/parents: \_\_\_\_\_ and/or \_\_\_\_\_

4. Are one or both of your parents members of the Settlement or were one of both of your parents members of the Settlement when they died? BOTH \_\_\_\_\_ One \_\_\_\_\_ None \_\_\_\_\_

Name of the Settlement member parent(s): \_\_\_\_\_ and \_\_\_\_\_

What Settlement is he/she a member of?

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

5. Did you live a majority of your childhood in a Settlement? YES or NO

If yes, from what age: \_\_\_\_\_ to age \_\_\_\_\_

What Settlement did you live in? \_\_\_\_\_

6. Where in the Settlement will you be living: \_\_\_\_\_ Land Location: \_\_\_\_\_

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7. Are you committed in living in the settlement: YES or NO                                                                                                                                                                                                                                       |
| 8. Are you in debt to this Settlement or any other Settlement? YES or No                                                                                                                                                                                                                          |
| IF yes<br>(a) What written agreements have you made to repay this debt? _____<br><br>(b) Are you in arrears on the agreement with a repayment agreement? YES or No                                                                                                                                |
| 9. Do you want to meet with the Settlement Council when they consider you application? YES or NO                                                                                                                                                                                                  |
| 10. Do you have a criminal record? YES or No                                                                                                                                                                                                                                                      |
| If yes, what were you charged with? _____<br><br>                                                                                                                                                                                                                                                 |
| 11. Do you agree to preserve a peaceful community and to comply with the Metis Settlements Act, General Council Policies and the By-Laws of this Settlement? YES or NO                                                                                                                            |
| Do you have any other information that you would like to include this application? YES or NO<br>If yes, provide the information: _____<br>_____<br>_____<br>_____<br>(If you require more additional space, please provide your information of a separate page and attach it to the application.) |
| Name of Father: _____ Father's Status: _____ Fathers Heritage: _____<br><br>Alias Names(s): _____ and/or _____<br><br>Date of Birth: _____ If treaty, name of which 1 <sup>st</sup> Nation? _____                                                                                                 |
| Name of Mother: _____ Mother's Status: _____ Mothers Heritage: _____<br><br>Alias Names(s): _____ and/or _____<br><br>Date of Birth: _____ If treaty, name of which 1 <sup>st</sup> Nation? _____                                                                                                 |
| Marital Status: Single Married Common-law Widow/Widower Separated Divorced<br>Name of Spouse: _____ Status: _____ Spouse's Heritage: _____<br><br>Maiden Name: _____ Alias Name: _____<br><br>Date of Birth: _____ If treaty, name of which 1 <sup>st</sup> Nation? _____                         |
| Full Name of 1 <sup>st</sup> child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |
| Full Name of 2 <sup>nd</sup> child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |
| Full Name of 3 <sup>rd</sup> child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |
| Full Name of 4 <sup>th</sup> child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |
| Full Name of 5 <sup>th</sup> Child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |
| Full Name of 6 <sup>th</sup> child: _____ D.O.B: _____ Status: _____                                                                                                                                                                                                                              |

Name of Grandparents on Father's side:

Grandfather's full name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Place of residency: \_\_\_\_\_

Grandmother's full name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Place of  
residency: \_\_\_\_\_

Name of Grandparents on Mother's side:

Grandfather's full name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Place of residency: \_\_\_\_\_

Grandmother's full name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Place of  
residency: \_\_\_\_\_

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Date received at the Office

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of person receiving the Application

\_\_\_\_\_  
Print name of person receiving the application

**Schedule 2**

**MEMBERSHIP DECLARATION**

MEMBERSHIP FORM 2

I, \_\_\_\_\_ of the \_\_\_\_\_  
(Metis Settlement, Town or City)

Of \_\_\_\_\_ in the Province of ALBERTA.  
(Name of Place)

**MAKE OATH AND SAY,**

1. I identify with Metis History and Culture, and
2. Based on the following facts, I have Canadian Aboriginal Ancestry,

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**And I make this solemn declaration conscientiously believing it to be true and knowing that it is the same force and effect as if made under oath.**

\_\_\_\_\_  
(Signature of person making affidavit)

Sworn before me

At the \_\_\_\_\_ of \_\_\_\_\_

In the Province of ALBERTA this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Commissioner of Oaths in and for the Province of Alberta

\_\_\_\_\_  
Print Name

My Commission expires on \_\_\_\_\_