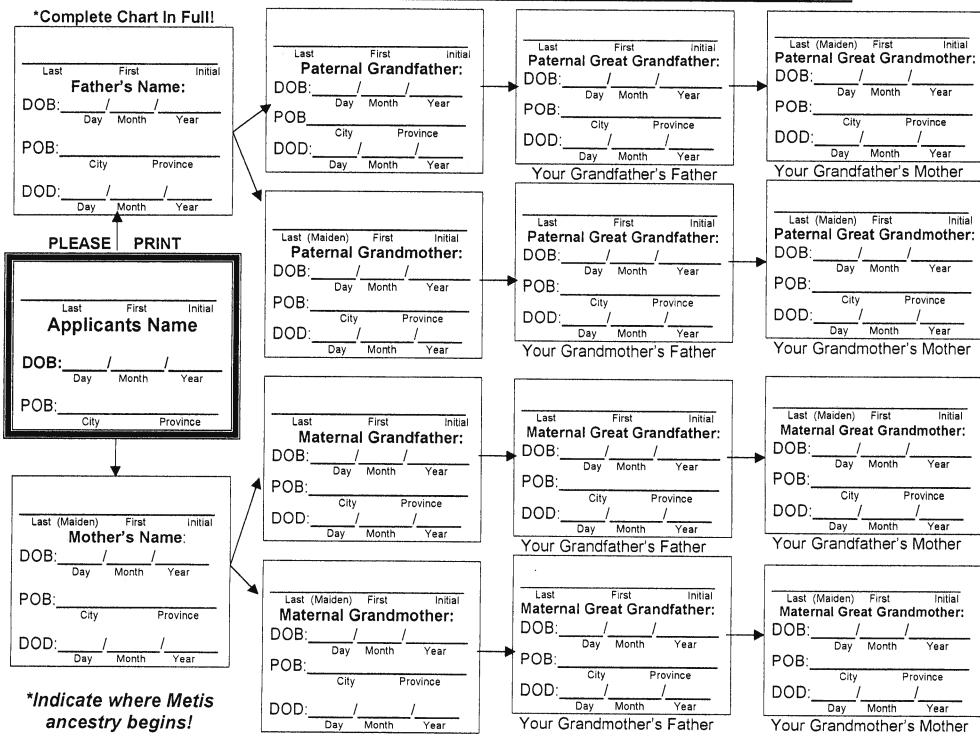
GENEALOGY CHART FOR REGISTRATION IN METIS NATION SASKATCHEWAN

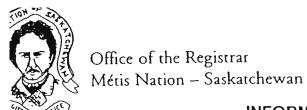




APPLICATION FOR CHANGE OF NAME OR ADDRESS

Office of the Registrar Métis Nation – Saskatchewan

	Applic	ation for	<u>:</u>			
	,				,	[
Surname	Given Nai	ne	_/M	iddle Na	/_ ame(s)	Sex
	Birth Date:	1	1		,	
	Day		Year	-		
Telephone Number: ()			_		
Citizenship Number:						
REGISTERED ADDRESS						
Number and Street		City	Prov	vince	Postal Code	
ADDRESS CHANGE						
Number and Street		City	/Pr	ovince	/ Postal Code	
CHANGE OF NAME INFORM Reason for change of name Copy of Marriage license at Please state the reason for	? O Marriage tached: O Yes					
Documents Attached:	No OYes		PT 88			-
NAME CHANGE INFORMAT	ION					
SURNAME	/ GIVEN	NAME			MIDDLE NAME(S	
Applicants Signature:			Date:	Day	Month Year	-
MNS Registrar:	Signature		Date:	Day	/ / / Month Yea	r
MNS REGISTRAR:			(Print)			



NOTIFICATION OF DECEASED MEMBER

INFORMATION ON THE DECEASED

	Notification R	egarding:
		1
Surname	Given Name	///
Birth Date: / / / / Day Month Year	_	Date of Death:/
MNS Local:	MN	IS Registry #:
Date to be removed from MNS Meml		al Listing:/
APPLICANT INFORMATION		
Last First Ir Relationship to Deceased:	nitial	Last First Initial Relationship to Deceased:
Telephone: () Address:		Telephone: () Address:
City Province Po	ostal Code	City Province Postal Code
MNS Local		MNS Local
MNS Registry #:		MNS Registry #:
	DEATH CERT	TFICATE
Is a copy of the Death Certifica	te attached?	Yes O No O To Follow
Signature:	Si	ignature:
Witness:) W i	itness: (
Date: / Sign Print Day Month Year	Last Name	Sign Print Last Name ate: / / Day Month Year
MNS Registrar:Signa	ture	Date:/
MNS REGISTRAR:		(Print)



APPLICATION FOR UNDER 16 YEARS OF AGE

	Application	on behalf of:	
			1
Surname	Given Name	e Middle Nam	e(s) Sex
Birth Date:// Child's Residence:City/Total	Place of	Birth:	
Name / Signature of Local Preside	ent:())	
PARENTAL INFORMAT			
Last First Mother Date of Birth: / / Day Month Yea MNS Local		Last First Father Date of Birth: / Day Month	_/ Year
MNS Registry #:		MNS Registry #:	
Is this child adopted? Are the birth parents of Metis A Last First Birth Mother MNS Local	Initial	Yes No Last First Birth Fath MNS Local	er
MNS Registry #:			
Address: Number City Province		MNS Registry #: Address: Number City Provin	Street
Mother's Signature:		Father's Signature:	
Witness:(Print Last Name	Witness: Date: / / / Day Month Year	Print Last Name
MNS Registrar:	Signature	Date:/_	/ Month Year
MNS REGISTRAR:		(Print)	
		· /	

219 Robin Crescent Saskatoon, Saskatchewan S7L GM8



Office of the Registrar Métis Nation – Saskatchewan

APPLICATION FOR REGISTRATION OF NEWBORN

This form to be used by parents who are already registered as members of the Metis Nation Saskatchewan.

We make this application as parent(s) or guardian(s) on behalf of our newborn child. We request that the applicant be registered as Metis as provided under the MNS Constitution and Citizenship Act.

	Application of					
	Given Name			1		
Surname	Given Name		Middle Name(s	Sex		
Birth Date://	Place of I	ace of Birth:		own Province		
PARENTAL INFORMATION	ON					
Last First Mother Telephone: ()	Initial		First Father			
		ļ				
Address: Number	Street		Number	Street		
City Province	Postal Code	City	Province	Postal Code		
MNS Local		MNS Local _				
MNS Registry #:		l .				
	BIRTH CER	TIFICATE				
Is a copy of the Birth Certifi	cate attached?	o Ye:	s O No			
Mother's Signature:	F:	ather's Signature:				
Witness: (/itness:		1		
Date: Sign / / / Day Month Year	Print Last Name	ate:/_	Sign / onth Year	Print Last Name		
MNS Registrar:		Dete				
	ignature	_ Date:	:/_ Day Moi	nth Year		
MNS REGISTRAR:		(Print)	,	. 54,		