

Form "B"

**Thunderchild First Nation
Thunderchild First Nation Membership Act, 2010**

Application for Membership for and on Behalf of a Minor
Personal information that you provide on this Application
is protected under provisions of the *Privacy Act* of Canada

Please read the *Thunderchild First Nation Membership Act, 2010* ("the Act") concerning requirements and processes regarding the within application for registration including appeals. If you do not have a copy of the Act, the Membership Clerk will provide you with a copy on request.

Date of Application: _____

Personal Information of the Applicant

Full Legal Name of Applicant:

("Applicant" means a person who is applying for Membership or a person applying for Membership for and on behalf of a Minor or an incapacitated person).

Relationship to the Prospective Member:

(Parent, grandparent or Permanent Custodial Parent only)

Contact Information of the Applicant (all communication and correspondence will be provided to the contact information as shown below and the Applicant will notify the Membership Clerk in writing in the event of a mailing address change):

Mailing Address:

Province: _____ **Postal Code:** _____

Phone: _____ **Fax:** _____ **Email:** _____

Personal Information of the Applicant

Full Legal Name of Prospective Member:

("Prospective Member" means a person who is the subject of an Application for Membership).

Male

Female

Date of Birth: _____

Place of Birth: _____

Birth Family Name: _____

INAC Registration No: _____ **Non-Registered** _____

Basis of Application

I, as the _____ (Parent, grandparent, or Permanent Custodial Parent) for and on behalf of the Prospective Member, hereby apply for the Prospective Member to be registered as a Member of Thunderchild First Nation pursuant to the following Section of the *Thunderchild First Nation Membership Act, 2010* (Check One Box Only):

- Section 4.01(a) of the Act** – An Application from a Prospective Member that was not included on a membership list or citizenship list of Previous Membership Codes and should have been included. Provide the name of the Previous Membership Code and the state on basis you should have been listed;

- Section 4.01(b) of the Act** - The Prospective Member has one Parent who is a Member or was a Member at the time of death;

- Section 4.01(c) of the Act - The Prospective Member has one grandparent who is a Member or was a Member at the time of death;**
- Section 4.01(d) of the Act - The Prospective Member is a direct descendant of a member of Thunderchild First Nation that existed immediately after the relocation of Thunderchild First Nation to its present location. The name of the person to whom you are claiming to be a direct descendant is _____ and attach a lineage tree connecting you to such member of Thunderchild First Nation that existed immediately after the relocation of Thunderchild First Nation to its present location;**
- Section 4.01(e) of the Act - The Prospective Member is the Provincially Adopted Child or Custom Adopted Child of _____ (mother) and _____ (father) (Fill in particulars and cross out inapplicable portions.); or**
- Section 4.01(f) of the Act - The Prospective Member is a Spouse of a Member.**

Status Requirement
(Section 4.03 to the Act)

I understand that I am required to trace my lineage to a Member that was a Member as of the date of the passing of the Act (April 6, 2010) by attaching a lineage tree connecting me to such Member and supported by the lineage information above as required. I understand that the within requirement does not apply to an application under Section 4.01 (e) and Section 4.01(f) of the Act.

Deemed Member Parent
(Section 4.04 to the Act)

I understand that if my Application is based on circumstances of one parent that is no longer living and such parent was not a Member at the time of death but would have been granted Membership if such parent applied for Membership immediately prior to death based on the Act or a Previous Membership Code in existence as of the date of death, I am required to show that such parents would have been entitled to become a member immediately prior to his/her/their death. The name of the deceased parent is _____

Undertaking to File a Renunciation
(Section 4.05 to the Act)

I am presently a member of another First Nation being _____ (insert name of First Nation). After receiving written confirmation of my conditional grant of Membership pursuant to this application I undertake to obtain and file with the

Membership Clerk a written statement from such other First Nation that I am no longer a member/citizen of such other First Nation. I understand that my admittance as a Member of Thunderchild First Nation is conditional and not effective until I deliver a written confirmation from such other First Nation. I have read and understand the provisions relating to renunciations contained in Section 4.05 of the Act.

Lineage Information

Lineage of the Prospective Member	
Name of Mother: _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Mother of Mother (Maternal Grandmother): _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Father of Mother (Maternal Grandfather): _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No

Name of Father: _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Mother of Father (Paternal Grandmother): _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Father of Father (Paternal Grandfather): _____ Birth Family Last Name: _____ Date of Birth (DD/MM/YY): _____ INAC Registry Number (10 digit): _____ Member of which First Nation or Tribe: _____	Living? <input type="checkbox"/> Yes <input type="checkbox"/> No

Legal Documentation and Other Supporting Materials

I understand that upon request by the Membership Clerk or the Membership Committee that I will provide legal documentation and other supporting materials including without limitation, relating to proof of lineage or identification.

I hereby declare that the content of the within Application is true to the best of my knowledge, information and belief.

Signature of Applicant:

Witness to Signature of Applicant:

Print name of Witness:
