



Application for Taku River Tlingit First Nation Membership



The purpose of this application is to assist the Enrolment Officer in determining Membership eligibility for the Taku River Tlingit First Nation Membership. An eligibility criterion is determined by the TRTFN Membership code that is attached to this application.

Please complete this application and lineage chart in full. All incomplete application forms or lineage charts will be returned to the sender for completion.

If you have any questions with respect to this application, please contact the TRTFN Enrolment Officer at (867) 334-0095 or by email at dawn.mckay @ gmail.com and she will be happy to assist you.

Full Name: _____ / _____ / _____
(Last Name) (First Name) (Middle Name)

Other Names used: _____ / _____
(examples: Maiden Name, Legal Name Change, etc) (First Nation's Name)

Contact Information:

Address: _____ / _____ / _____ / _____
(Street) (City) (Prov.) (Postal Code)

Telephone No.: _____ / _____ / _____ / _____
(Home) (Work) (Cellular/Mobile) (Fax)

E-mail address: _____ Website address: _____

Personal Information: Gender: Male Female Age: _____ Birthdate: _____ / _____ / _____
(m) (d) (y)

Social Insurance No.: _____ - _____ - _____ Status No.: _____

Clan Information: Clan: Wolf Crow Clan House: _____

Other Information:

Are you a member of any other First Nation: No Yes Name of First Nation: _____

Are you a beneficiary of the above First Nation: No Yes

Do you receive any benefits from the above First Nation? If yes, please list: _____

If you are completing this application for someone other than yourself, please complete the following information.

Name of person completing application: _____

Relation to applicant: Mother Father Legal Guardian Adoptee Parent Other: _____

Address: _____ / _____ / _____ / _____
(Street) (City) (Prov.) (Postal Code)

Telephone No.: _____ / _____ / _____ / _____
(Home) (Work) (Cellular/Mobile) (Fax)



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E-mail address: _____ Website address: _____

Please provide the following documentation with this application:

- Photocopy of Birth Certificate – Front and back.
- Photocopy of any legal documents (ex. Legal name change, adoption papers, custody agreements, marriage certificate, etc.)
- Photocopy of Status Card (only in the case of DIA Status Indian)

Statement of Disclosure

I _____ hereby agree that the above information is correct. I agree to disclose to the First Nation any additional information that may affect this application at the time of change.

Signature Date

Once complete, please mail original application to:

Taku River Tlingit First Nation
 Attn: Enrolment Officer
 Box 132
 Atlin Bc V0W 1A0

Office use only – do not complete

Date received _____

Enrolment Officer

Approved Denied Referred to Membership Commission date: _____

Member Status: House Associate Residency Clan House: _____

Enrolment Officer Signature _____

Membership Commission

Approved Denied

Member Status: House Associate Residency Clan House: _____

Notes:

Membership Commission signatures _____
