PAPASCHASE DESCENDANTS' MEMBERSHIP FORM

Instructions

This application form must be filled out by all applicants who wish to be recognized as probationary members of the Papaschase First Nation to be eligible to vote for or to run as Chief or Council in elections for the Papaschase Descendants Council. This application will ensure that all bona fide descendants of the Papaschase Band are recognized and entitled to participate on a collective basis in the proceeds of any settlement, judgment, or any other relief granted by any action against Canada for the unlawful surrender and sale of Papaschase Indian Reserve #136 in 1888 and the unlawful dissolution of the Papaschase Band.

Any person who believes in good faith that they are a direct descendant of a person who was a bona fide member of the Papaschase Indian Band #136 from 1876 to 1888 is entitled to fill out an application. For greater certainty, this shall include all bona fide Papaschase Descendants, regardless of whether they are presently Metis, status, or non-status Indians.

Any person who is currently a member of another First Nation or Metis Settlement would not lose their membership by filling out an application or swearing an affidavit. If the Papaschase Descendants are later recognized as a "Band" either under the Indian Act or through negotiations, all Papaschase Descendants will be free to choose whether to transfer to the Papaschase First Nation or remain with their present Band or Metis Settlement. However, those descendants who are status or non-status and don't have a parent band are eligible to join immediately.

]	Full Name of Applicant	
A	Address:	
		Home:
	-	
	Date of Birth:	
		in the space below which Indian Band you belong
	are you a member of a Metis Settlement? If settlement you belong to	o, please identify in the space below which Metis
• N	Iame of Spouse:	
• Is	s your spouse a direct descendant of the Papa	aschase Band in his/her own right:
Ye	es No	

Names and birthdates of children, if any (please note that if your children are 18 years of age or over, they must fill out their own membership forms or affidavits to be registered as Papaschase Descendants)

Full Names of Children	Date of Birth	Place of Birth

Provide as detail as possible regarding the full names, dates and places of birth, and other information regarding your parents, grandparents, and great-grandparents to determine your lineage and eligibility as a Papaschase Descendant (attach family tree or pedigree chart if available):

•	Mother	
•	Date and Place of Birth	
•	Band Membership	_ Treaty Number
•	Father	
•	Date and Place of Birth	
•	Band Membership	_ Treaty Number
•	Paternal Grandmother	
•	Date and Place of Birth	
•	Band Membership	_ Treaty Number
•	Paternal Grandfather	
•	Date and Place of Rirth	

•	Band Membership	Treaty Number
•	Maternal Grandmother	
•	Date and Place of Birth _	
•	Band Membership	Treaty Number
•	Maternal Grandfather	
•	Date and Place of Birth	
•	Band Membership	Treaty Number
direct of 1888. I docum dates a paylist	descendant of a person who Please provide as much information that you are and places of birth, Treaty nurs, the year Metis scrip was particular than the places of birth, and places of birth, Treaty nurs, the year Metis scrip was particular than the places of birth, and the birth birth, and the birth birth birth, and th	ion re: your lineage and family history to confirm whether you are a was a bona fide member of the Papaschase Indian Band from 1877 to rmation as you can about your ancestors and attach any relevant a direct descendant of such person(s), including their full name(s), ambers, the year they were paid treaty annuities on the Papaschase paid (if applicable), the year they transferred to another band and name by other relevant information:

In support of this Application Form and to assist in determining whether you are eligible to be recognized as a member of the Papaschase Descendants, please attach copies of the following documents in your possession:			
Birth Certificates	Baptismal Certificates	Marriage Certificates	
Death Certificates	Scrip Certificates	Treaty/Status Card	
Paternity Orders	Adoption Orders Family	Tree/Pedigree Chart	
Annuity Paylists	Band/DIAND Records	Residential School Records	
Other (please provide details)		
Please provide any other rele	vant information below or attach to	this document	

Signature of Applicant	Date	
Commissioner of Oaths	Date	