

**APPENDIX A
APPLICATION FOR MEMBERSHIP**

ASHCROFT INDIAN BAND MEMBERSHIP CODE

Eligibility for Membership

In accordance with section 3.10 of the Membership Code, a person who is a Status Indian is entitled to be a Member of the Band, if he or she has at least one biological parent who is both:

- (a) a Status Indian; and
- (b) a Band Member.

Submitting the Application

Applications for Membership are to be submitted to the Membership Coordinator, at the Administration Office of the Band, 414 Cornwall Road, PO Box 440, Ashcroft, BC V0K 1A0, phone 250-453-9154.

This Application for Membership with all original supporting legal documents should either be hand delivered to the Band or forwarded by registered mail. The Band will make copies of the original legal documents and return the originals to you, upon request.

An Application for Membership on behalf of a person less than 18 years old may be completed and signed by the parent or legal guardian.

Please submit a separate Application for each of your children under the age of 18 years who may be entitled to Membership.

Response by the Band

Please give the Band 60 days to investigate this Application, and respond to you. The Band may require further documents or information.

The Application

Date _____, 20____

Person applying for membership in the Band (the "Applicant"):

Name: _____
 Phone: _____
 E-mail: _____
 Address: _____
 Date of Birth: _____ Place of Birth: _____
 Copy of Indian Status card attached: _____
 Member of a Band/First Nation-which one: _____
 Proof of Band/First Nation membership: _____
 Birth certificate attached: _____
 Any previous loss of membership in the Band: _____
 Date of any previous Application for Membership: _____

Mother of the Applicant:

Name: _____
 Maiden Name: _____
 Circle one: Biological Mother Adoptive Mother Step Mother
 Phone: _____
 E-mail: _____
 Address: _____
 Date of Birth: _____ Place of Birth: _____
 Date of Death: _____ Place of Death: _____
 Copy of Indian Status card attached: _____
 Member of a Band/First Nation-which one: _____
 Proof of Band/First Nation membership attached: _____
 Birth certificate attached: _____
 Death certificate attached: _____
 Proof that this is the mother of the Applicant: _____
 Any previous loss of membership in the Band: _____

Married to: Name: _____
 Address: _____
 Date of marriage: _____ Place of marriage: _____
 Marriage certificate attached: _____
 Date of divorce: _____ Place of divorce: _____
 Court order for divorce attached: _____

Is the Mother a female Non-Indian, whose name was added to the Indian Register prior to April 17, 1985 upon her marrying a Status Indian [circle one] yes no

Father of the Applicant:

Name: _____

Circle one: Biological Father Adoptive Father Step Father

Phone: _____

E-mail: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Date of Death: _____ Place of Death: _____

Copy of Indian Status card attached: _____

Member of a Band/First Nation-which one: _____

Proof of Band/First Nation membership attached: _____

Birth certificate attached: _____

Death certificate attached: _____

Proof that this is the father of the Applicant: _____

Any previous loss of membership in the Band: _____

Married to: Name: _____

Address: _____

Date of marriage: _____ Place of marriage: _____

Marriage certificate attached: _____

Date of divorce: _____ Place of divorce: _____

Court order for divorce attached: _____

August 30, 2019 Draft for Referendum Vote

Other Members of the Applicant's Family Who Have Indian Status:

Name: _____
 Relationship to Applicant: _____
 Phone: _____
 E-mail: _____
 Address: _____
 Date of Birth: _____ Place of Birth: _____
 Date of Death: _____ Place of Death: _____
 Copy of Indian Status card attached: _____
 Member of a Band/First Nation-which one: _____
 Proof of Band/First Nation membership attached: _____
 Birth certificate attached: _____
 Death certificate attached: _____

Name: _____
 Relationship to Applicant: _____
 Phone: _____
 E-mail: _____
 Address: _____
 Date of Birth: _____ Place of Birth: _____
 Date of Death: _____ Place of Death: _____
 Copy of Indian Status card attached: _____
 Member of a Band/First Nation-which one: _____
 Proof of Band/First Nation membership attached: _____
 Birth certificate attached: _____
 Death certificate attached: _____

Name: _____
 Relationship to Applicant: _____
 Phone: _____
 E-mail: _____
 Address: _____
 Date of Birth: _____ Place of Birth: _____
 Date of Death: _____ Place of Death: _____
 Copy of Indian Status card attached: _____
 Member of a Band/First Nation-which one: _____
 Proof of Band/First Nation membership attached: _____
 Birth certificate attached: _____
 Death certificate attached: _____

(Complete and submit additional copies of this page, if required)

Signing the Application:

The Membership Code in section 7.1 provides that the name of a person will be removed from the Membership List if the name was entered on the Membership List on the basis of either:

- (i) a material error in the facts on which his or her entitlement to membership was based; or
- (ii) any false or misleading statements made by that person on the Application for Membership.

The person signing this Application verifies that all the information set out above and all the documents attached to this Application are true and correct.

Sign only once in the correct box below.

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| <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Signature of Applicant</p> | <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Signature of Parent or Legal Guardian for Applicant Less than 18 years old</p> |
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