



## ABORIGINAL ANCESTRY CHART

**Please note: All applicants must have a verified genealogy presented to us by a certified genealogist prior to applying as a member**

Please fill out Aboriginal side as complete and accurate as possible. Lack of documentation can cause longer delays in verification. Please allow up to 8-10 weeks for verification. Don't forget to attach a photocopy of your genealogy (family tree) with this form to prove your aboriginal lineage.

Name of... (use maiden names)	Date of Birth (M/D/Y)	Where was she/he from? (town/province)	Does she/he have aboriginal ancestry?	If yes, please indicate Métis/FN/Inuit
Your Mother				
Your Father				
Your mother's Mother				
Your Mother's Father				
Your Father's Mother				
Your Father's Father				

**\*\*ATTACH ALL DOCUMENTATION YOU HAVE TO PROVE YOUR ABORIGINAL ANCESTRY\*\***

All material I submit in this certification and genealogy is true and accurate to the best of my knowledge. I understand that any misleading information will result in the termination of my Bras d'Or Lake Metis Nation membership card.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Bras d'Or Lake Metis Nation**

**Phone: 902-497-5914 Email: regionalchief@eastlink.ca**

Your Bras d'Or Lake Metis Nation membership card:

This is the back of your membership card. Please sign the appropriate signature line below.  
(Be sure to include this page with your application - also please stay within the lines)

X
_____ Signature Is Aboriginal under Section 35 (1)(2) of the Canadian Constitution Act, 1982.
X
_____ Regional Chief's Signature

A \$100.00 (Canadian) cheque or money order made payable to: (Bras d'Or Lake Metis Nation). Persons residing outside of Canada, please send an international money order. This is a processing fee and it is non-refundable. Your Card will be renewable with your existing photo and signature (EACH YEAR).

A new photo will only be required every five years. The cost for ANNUAL RENEWAL will be \$25.00 DUE ON JANUARY EACH YEAR.

Children under 18 years old ATTENDING SCHOOL with proof of letter from the school pay 10.00 for a membership card and \$10.00 renewal each year.

## **Things you need for a new Membership**

***Please note: All applicants must have a verified genealogy presented to us by a certified genealogist prior to applying as a member***

- Application filled out and signed on the last page
- Copy of driver's license
- Copy of Birth Certificate
- You need 2 actual passport photos from Walmart, Costco, etc
- Second page must be filled out, signed and dated
- We do not have a certified genealogist on site and the applicant must provide a valid copy of his or her genealogy since our organization is not responsible to research a person's genealogy

- The information provided must show how the applicant is connected to the genealogy enclosed
- Genealogy or Ancestry documentation
- Cheque for \$100.00 written out to Bras d'Or Lake Metis Nation.

**If you already had an existing Card and want to Join our local Band**

- You will need a copy of your existing Card
- You will need to fill out a new application with us
- You will need a copy of your genealogy or ancestry documentation
- You need 2 actual passport photos from Walmart, Costco, etc
- Second page must be filled out, signed and dated
- We do not have a certified genealogist on site and the applicant must provide a valid copy of his or her genealogy since our organization is not responsible to research a person's genealogy
- The information provided must show how the applicant is connected to the \*genealogy enclosed

**\*For people who are looking to get genealogy research done you can phone:**  
(613) 632-3049

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Bras d'Or Lake Metis Nation DNA Witness Form

**Bras d'Or Lake Metis Nation DNA Witness Form**

To Whom It May Concern,

The DNA kit with barcode # \_\_\_\_\_, sample was provided, in my...

Presence on day (Date) \_\_\_\_\_ by

(Person submitting saliva sample) \_\_\_\_\_ at

(Place) \_\_\_\_\_

It is sealed, and is ready for return mail delivery to the destined lab for processing.

Signature of Person submitting Saliva Sample,

\_\_\_\_\_

Signature of Witness \_\_\_\_\_

Title of Witness \_\_\_\_\_