

Application for Registration of Newborn

This form is to be used by parents who are already registered as members of the Métis Nation Saskatchewan.

We make this application as parent(s) or guardian(s) on behalf of our newborn child. We request that the applicant be registered as Métis as provided under the MNS Constitution and Citizenship Act.

Application on behalf of:

_____ / _____ / _____	_____ / _____	_____ / _____	_____ / _____
Surname	Given Names	Middle Name	Sex
Birthdate: _____ / _____ / _____	Place of Birth: _____		
Day Month Year	City	Province	

Parental Information

Mother:

Surname First Initial
Telephone: (____) _____
Address: _____

MNS Local: _____
MNS Citizenship # _____

Father:

Surname First Initial
Telephone: (____) _____
Address: _____

MNS Local: _____
MNS Citizenship # _____

Is a copy of the Birth Certificate attached? Yes No To follow

Mothers Signature: _____

Fathers Signature: _____

Witness: _____

Witness: _____

Date: _____ / _____ / _____
Day **Month** **Year**

Date: _____ / _____ / _____
Day **Month** **Year**

MNS Registrar: _____	Date: _____ / _____ / _____
Signature	Day Month Year
MNS Registrar _____	(Printed Name)

