



**APPLICATION FOR REGISTRATION OF A MINOR CHILD  
UNDER THE *INDIAN ACT***

We:

**Mother:** \_\_\_\_\_

Registry Number: \_\_\_\_\_

Date of Birth: Year: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

**Father:** \_\_\_\_\_

Registry Number: \_\_\_\_\_

Date of Birth: Year: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

**wish our child** \_\_\_\_\_

Date of Birth: Year: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

at (city, town, village): \_\_\_\_\_

to be registered with (check only one ): Father \_\_\_\_\_ Mother \_\_\_\_\_

Child resides(check only one): On reserve \_\_\_\_\_ Off reserve \_\_\_\_\_

\_\_\_\_\_  
Mother's signature

\_\_\_\_\_  
Father's signature

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

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

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

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