



TSAWWASSEN FIRST NATION
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Enrolment Application

Eligibility and Enrolment Committee

P.O. Box 18026

1215C-56 Street,

Delta, B.C. V4L 2M4

Phone: 1-604-948-5290

Toll Free: 1-888-943-2112

Email: enrollinfo@tsawwassenfirstnation.com

Website: www.tsawwassenfirstnation.com

APPLICATION NUMBER

Applicant Name: _____

Adult Minor

The information on this form is collected under the authority of sections 3, 4, and 14 of the *Membership Act* (TFN). The information provided will be used to fulfill the requirements of Eligibility and Enrolment under the Tsawwassen First Nation Treaty. If you have any questions about the collection or use of this information, please contact the Manager of Government Services at (604) 943-2112.



TSAWWASSEN FIRST NATION Enrolment Application

This is an application form for enrolment as a Tsawwassen Member under the Tsawwassen First Nation Final Agreement (Final Agreement).

There are 10 pages in this application form. If you need assistance in completing this application, please contact the Eligibility and Enrolment Committee at (604) 943-2112 or toll free at 1-888-943-2112, or email enrollinfo@tsawwassenfirstnation.com. Parents or guardians may complete this application form on behalf of their minor children or individuals for whom they are legal guardians.

The information you provide in this application will be used to determine your eligibility to be enrolled as a Tsawwassen Member under the Final Agreement.

Your application will be assessed by the Tsawwassen Eligibility and Enrolment Committee based on the eligibility criteria set out in the Final Agreement.

You are entitled to be enrolled as a Tsawwassen Member under clause 2 of chapter 21 of the Eligibility and Enrolment chapter of the Final Agreement if you are:

1. Currently a Tsawwassen First Nation band member listed or entitled to be listed as a band member on the Tsawwassen First Nation band list as of the day before the Final Agreement comes into effect - this is called the "effective date"; **OR**
2. Of Tsawwassen ancestry through your mother or through your father; **OR**
3. Adopted under a law recognized in Canada, or under Tsawwassen First Nation customs, by an individual eligible to be enrolled under the Final Agreement; **OR**
4. A descendant of an individual eligible to be enrolled above.

All existing Tsawwassen First Nation band members are entitled to be enrolled and those applications will be approved by the Eligibility and Enrolment Committee. However, all existing band members **must** complete an enrolment application and submit it to the Committee in order to be enrolled.

NOTE: It is your responsibility to keep the Eligibility and Enrolment Committee informed of your current address and personal information.



TSAWWASSEN FIRST NATION Enrolment Application

Applications will be considered incomplete or denied if the following forms have not been filled out, or you have not attached the necessary documentation, and/or you and your witness have not signed the Declaration.

In this package you will find:

- General Information - pages 2 & 3
- Preliminary Eligibility Questions – page 4
- Personal Information – page 5
- Ancestral Chart (optional) – page 6
- Documentation (attach photocopies) – page 7
- Enrolment in Another Land Claims Agreement – page 8
- Enrolment in Another Indian Band – page 9
- Declaration (must be signed and witnessed by another person) – page 10

All information that you provide in this application will be kept strictly confidential as provided under the Tsawwassen Final Agreement and federal and provincial law. **Submitting an incomplete application or false statement may cause a delay in its determination and may result in its rejection.**

YOU MAY APPLY AT ANY TIME TO BE ENROLLED AS A TSAWWASSEN MEMBER UNDER THE FINAL AGREEMENT. IF YOU CHOOSE NOT TO ENROL, YOU WILL NOT BE ELIGIBLE FOR TREATY BENEFITS.

Please answer all the questions to the best of your ability and remember...

It is your responsibility to prove that you meet the enrolment criteria.



TSAWWASSEN FIRST NATION Enrolment Application

PRELIMINARY ELIGIBILITY QUESTIONS

Please check the box that applies to you:

- Are you currently a Tsawwassen band member?
- Are you of Tsawwassen ancestry through your mother or father?
- Are, or were, you adopted as a child by an individual eligible to be enrolled under the Final Agreement?
- Are you a descendant of an individual eligible to be enrolled in any of the above mentioned?

You may use the space below to provide any additional information you desire in relation to your eligibility and attach additional pages if necessary.



TSAWWASSEN FIRST NATION Enrolment Application

PERSONAL INFORMATION

Last Name: _____ Given Names: _____

Date of Birth (mm/dd/yyyy): _____ Male Female

Place of Birth: _____ Country of Birth: _____

Are you a registered Status Indian under the Indian Act in Canada? Yes No

Status/Band Number: _____ Name of Band: _____

Address: _____

City: _____ Province/State: _____

Country _____ Postal Code/Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax: _____

Email address: _____

Marital Status: Single Widowed Divorced Separated

Married Maiden Name (if applicable): _____

Common-law Name of spouse (if applicable): _____

If your spouse is aboriginal, what band/First Nation/tribe is he/she from?

Are you known by any other names or have an ancestral name? _____

Have you ever had a legal name change? Yes No

If yes, what was your name before this change? _____



TSAWWASSEN FIRST NATION Enrolment Application

ANCESTRAL CHART

Please use maiden names
 Please note if Ancestor is not buried in Tsawwassen, note where buried
 Please use NA if the question is not applicable, such as for Date of Death - NA
 Please use Unknown if the information is unknown, forgotten or records are lost

Father Name	Grandfather Name	Great-Grandfather Name
Date of Birth	Date of Birth	Date of Birth
Place	Place	Date of Marriage
Date of Marriage	Date of Marriage	Date of Death
Place	Place	Band/Status#
Date of Death	Date of Death	Great -Grandmother Name
Place	Place	Date of Birth
Band/Status#	Band/Status#	Date of Death
Your Name	Grandmother Name	Band/Status#
Date of Birth	Date of Birth	Great-Grandfather Name
Place	Place	Date of Birth
Date of Marriage	Place	Date of Marriage
Place	Date of Death	Date of Death
Date of Marriage #	Place	Band/Status#
Spouse Name	Band/Status#	Great -Grandmother Name
Born	Grandfather Name	Date of Birth
Place	Date of Birth	Date of Death
Band/Status#	Place	Band/Status#
Mother Name	Date of Marriage	Great -Grandmother Name
Date of Birth	Place	Date of Birth
Place	Band/Status#	Date of Death
Date of Marriage	Grandmother Name	Band/Status#
Place	Date of Birth	Great -Grandmother Name
Date of Death	Place	Date of Birth
Place	Date of Death	Date of Death
Band/Status#	Place	Band/Status#
	Band/Status#	Date of Birth
		Date of Death
		Band/Status#



TSAWWASSEN FIRST NATION Enrolment Application

DOCUMENTATION

To complete this application, please list the documentation you are attaching to prove your identity and the facts relevant to the Tsawwassen Eligibility Criteria.

Please provide a photocopy (both sides) of **at least one** or more of the following:

TYPE OF DOCUMENT	ISSUE DATE ON DOCUMENT (mm/dd/yyyy)
Birth Certificate	
Marriage Certificate	
Divorce Certificate	
Adoption Certificate	
Drivers License	
BC Identification	
Status Card	

You may use the space below to provide any other documentation which is relevant to the Tsawwassen Eligibility Criteria that proves your identity (i.e. statutory declaration).



TSAWWASSEN FIRST NATION Enrolment Application

ENROLMENT IN ANOTHER LAND CLAIMS AGREEMENT

If you meet the Tsawwassen eligibility criteria and you are presently enrolled in another **treaty** or **land claims** agreement in Canada, you may be eligible to be enrolled as a Tsawwassen member **only** if you withdraw from enrolment under the other treaty or land claims agreement.

1. Are you presently enrolled or receiving benefits in another treaty or land claims agreement in Canada?

YES **NO** *If NO, go to page 9*

2. If yes, please provide the name of the other treaty or land claims agreement.

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3. Are you prepared to withdraw from enrolment in the other treaty or land claims agreement in order to enrol as a Tsawwassen member?

YES **NO**

Note that the Tsawwassen eligibility criteria provides that an individual can not be enrolled in another land claim or treaty or be a member of another band or tribe.



TSAWWASSEN FIRST NATION Enrolment Application

ENROLMENT IN ANOTHER INDIAN BAND

If you meet the Tsawwassen eligibility criteria, and you are presently a **member** of another Indian Band in Canada, you may be enrolled as a Tsawwassen member **only** if you withdraw membership from that Indian band.

1. Are you presently a member of another Indian band in Canada?

YES **NO** *If NO, go to page 10*

2. If yes, please provide the name of that Indian band.

3. Are you prepared to withdraw from membership in the other Indian band in order to enroll as a Tsawwassen member?

YES **NO**

Note that the Tsawwassen eligibility criteria provides that an individual can not be enrolled in another land claim or treaty or be a member of another band or tribe



TSAWWASSEN FIRST NATION Enrolment Application

DECLARATION

APPLICANT:

I, _____ (print name), also known as
(i.e. ancestral name) _____, SOLEMLY DECLARE
that the facts contained in this application are true, to the best of my knowledge.

Applicant signature

Date signed (mm/dd/yyyy)

WITNESS To Applicant's Signature:

Witness signature

Date signed (mm/dd/yyyy)

Witness Name (please print)

APPLICANT ON BEHALF OF:

I, _____ (print name), SOLEMLY DECLARE that the facts
contained in this application are true, to the best of my knowledge and I am authorized
to sign on behalf of _____ (print name), a minor
(under 18 years of age) or an adult whose affairs that I have the legal authority to
manage.

Parent/Guardian signature

Date signed (mm/dd/yyyy)

WITNESS to Parent/Guardian's Signature:

Witness signature

Date signed (mm/dd/yyyy)

Witness Name (please print)