STATEMENT OF CONSENT FOR TRANSFER OF A CHILD 1 (15 years of age or younger) OR DEPENDENT ADULT 2

Name of Child / Dependent Adult:	Residence (after transfer is completed):
Date of Birth:	☐ On (own) reserve ☐ On (other) reserve ☐ Off reserve
Current Registry No.:	Crown land
STATEMENT:	
This is to confirm that(Name of (Child/Dependent Adult) is accepted as a
member of the(Admitting Ba	Band/First Nation,
I/we hereby consent to the removal of his/her name	ne from (Current Band/First Nation)
Band List/Registry Group.	
SIGNATURE OF PARENT(S) / LEGAL GUAR	RDIAN(S):
α Signature of Mother/Legal Guardian	$rac{\mathcal{X}}{ ext{Signature of Father/Legal Guardian}}$
Printed Name of Mother/Legal Guardian	Printed Name of Father/Legal Guardian
Address: Number/Street/Apartment/P.O. Box	Address: Number/Street/Apartment/P.O. Box
Address: City/Town Province/State Postal/Zip Code ()	Address: City/Town Province/State Postal/Zip Code
Telephone Number	Telephone Number
Date	Date

¹ If there are separation agreements, court orders or legal proceedings pertaining to the custody of the child, include the most recent photocopies of all legal documents.

² Transfer of a dependent adult MUST include a copy of an Order of Guardianship or a document issued by the province, territory or state that serves the same purpose.