



### STATUTORY DECLARATION (BIOLOGICAL PARENTS)

Canada \_\_\_\_\_ In the matter of the parentage of \_\_\_\_\_  
 (Full name of child)

Province/Territory of \_\_\_\_\_ Born on \_\_\_\_\_  
 (Child's date of birth)

At \_\_\_\_\_  
 (City, Province)

**To wit:**

I, \_\_\_\_\_, of \_\_\_\_\_  
 (Full name) (Street address)

of \_\_\_\_\_, in the Province/Territory of \_\_\_\_\_  
 (City/town, etc.)

**Do solemnly declare as follows:**

1. That I am the biological parent of \_\_\_\_\_ who was born on \_\_\_\_\_  
 (Full name of child)  
 \_\_\_\_\_  
 (Date of birth of child)

2. I am registered under registration number \_\_\_\_\_ and my date of birth is \_\_\_\_\_  
 (Parent's registration number)  
 \_\_\_\_\_  
 (Date of birth of parent)

3. The other biological parent of said child is \_\_\_\_\_  
 (Full name of other biological parent)

whose registration number is \_\_\_\_\_ and date of birth is \_\_\_\_\_  
 (Registration number of other parent) (Date of birth of other parent)

*I make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.*

**Signature of Declarant**

X \_\_\_\_\_

**Declared before me**

At the of \_\_\_\_\_ of \_\_\_\_\_ in the Province/Territory of \_\_\_\_\_  
 (City/town, etc.) (Name of city/town, etc.)

\_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

<p>Must be witnessed by a person authorized as a Commissioner for the Taking of Oaths such as a lawyer, notary public, justice of the peace or an ISC official authorized under s.108 of the <i>Indian Act</i>.</p>	<p><b>Witness' stamp giving title and authorization</b></p>
<p><b>Signature of Witness</b></p>	
<p>X</p>	