



Indigenous People's Alliance of Manitoba APPLICATION FOR MEMBERSHIP

6 STEP INSTRUCTIONS:

- 1 Complete each section.
- 2 Sign and date the application.
- 3 Include a recent 1"x1" photograph of yourself (head and shoulders).
- 4 Include your payment (Money Order or Certified Cheque ONLY payable to IPAM)
- 5 Mail to: 5 St. Anne's Road, Winnipeg, Manitoba R2M 2X9. Call: (204) 675-8881
- 6 Send copies of birth certificate, photo I.D., copies of birth certificate of children and spouses birth certificate and photo I.D. and proof of Aboriginal Ancestry.

ABORIGINAL STATUS check appropriate answer

Metis Status Indian with Band Membership Status Indian without Band Membership Non-Status Indian Inuit
 Do you normally live on a First Nation (Native) Reserve? Yes No

Any person of Aboriginal descent but not a band or tribal member residing on a reserve, in accordance with the Coalition of Aboriginal People.

FEES Application Fee \$10.00 per person (youth included). NO Renewal fees effective Sept. 15, 2013. Replacement card fees \$20.00.

METHOD OF PAYMENT

MONEY ORDER
 CHEQUE (Certified Cheque ONLY payable to IPAM) Total Amount Sent \$

NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED. PLEASE INSURE 6-STEP INSTRUCTIONS ARE FOLLOWED

PERMISSION TO ACCESS FILE By signing below, I give permission for my file to be accessed on behalf of anyone sharing my ancestry.

Signature _____ Date ____/____/____ (Day/ Month / Year)

PERSONAL INFORMATION (Please Print)

Name: _____
Last First Middle

Address: _____ City/Town: _____ Postal Code: _____
Box #/R.R. Street Apt.#

Phone No.: _____ E-Mail Address: _____

Maiden Name _____ Birth Date ____/____/____ Place of Birth _____ Male Female
if Applicable Day Month Year

Please list your Métis community or affiliated organization _____

Eye colour: _____ Height: _____

Children	Last Name	First Name	Middle Names	Date of Birth (optional)
1				
2				
3				
4				
5				
6				
7				

Declaration (for admission as a regular associate member) I hereby make an application for membership in the Indigenous People's Alliance of Manitoba. I declare that I am an Indigenous person of North America and that I am the full age of 18.

I consent to the use of the optional information for demographic membership data used for the purposes of statistical analysis of membership needs and for factual support in submitting funding applications for programs and services. I understand that this data will be used for general membership information and that IPAM will not divulge my individual information without my written consent.

Applicant's Signature

Date of Application ____/____/____ (Day/ Month / Year)