Six Nations Membership Guarantor Form

(In lieu of government identification)

Instructions for Completing the Guarantor Form:

Instructions:

- 1. Complete the "Applicant's Declaration" Section of the Guarantor Form.
- 2. **Provide** your **Guarantor** with a **current photo** of the applicant, either a personal photo or a passport photo.
- 3. Take the completed forms and photo to an eligible guarantor (see list below).
- 4. Have the guarantor complete and sign the Guarantor's Declaration section of the guarantor form.
- 5. Ensure the Guarantor signs the back of the picture along with a statement that they certify the picture is a true likeness of the Applicant.

Who can sign your form, the following are eligible Guarantors:

Note: The Guarantor must have known you for at least two (2) years:

- Dentist, Medical Doctor, or Chiropractor
- Mayor, Magistrate, or Police Officer (Six Nations, municipal, provincial or RCMP)
- Judge, Lawyer, Notary Public, or Indian Registration Administrator
- Minister of Religion (authorized under the province to perform marriages)
- Optometrists, Pharmacist, or Postmaster
- Principal of a primary or secondary school
- Professional Accountant
- Professional Engineer
- Senior Administrator or a teacher in a community college or university
- Social Worker
- Veterinarian
- Chief or Councillor
- Registered Band Member from Six Nations, or other First Nations (ex. mother/father/aunt/uncle/friend etc.)

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Six Nations of the Grand River

Protected once completed.

Notice to all applicants and guarantors:

Anyone knowingly submitting a false or misleading written declaration to obtain or renew the Certificate of Indian Status (CIS) have:

- a. His/her renewal or new certificate of Indian refused by the issuing agent and/or Registrar.
- b. The card issued by the issuing agent and/or Registrar revoked.

Applicant's Declaration:

I solemnly declare that:

Print Name:

- 1. The information on this application is correct.
- 2. I have personally known the guarantor for at least two (2) years.

Signature:				
Date:				
I, Guarantor, solemnly declare tha made in the accompanying application at least two (2) years and have cerof the applicant.	ation form are	f my knowledge an true. I have known	the applic	cant personally for
	Guaranto	r Information:		
Surname:		Given Name:		
Occupation (if applicable):		Name of firm (if applicable):		
Business Address (if applicable): Street:	City:	Province:		Postal:
Telephone: () Home		() Work		
Registration No. (10-digit):				
Guarantor's Signature:	<u>_</u>	Date:		