



# MoCreebec Eeyoud

## INDIVIDUAL MEMBERSHIP APPLICATION (OVER 18 YEARS OLD)

APPLICANT'S  
FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
DD/MM/YYYY

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

CLAN (IF APPLICABLE) \_\_\_\_\_

I, \_\_\_\_\_, hereby declare that :

- (a) I am, or I am a descendant of a "Y" dialect Cree-speaking person, or I am a spouse or an adopted child of such a person, and;
- (b) I am committed to the principles, purpose, and objectives of the MoCreebec *Constitutional Framework*, ratified June 6, 1993.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF WITNESS