

**STATEMENT OF CONSENT**  
**FOR TRANSFER OF AN ADULT**  
(18 years or older)

Name: \_\_\_\_\_  
Date of Request: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Current Registry No.: \_\_\_\_\_

**STATEMENT:**

This is to confirm that I, \_\_\_\_\_ am accepted as a  
(name)  
member of the \_\_\_\_\_ Band/First Nation,  
(Admitting Band/First Nation)

I hereby consent to the removal of my name from the \_\_\_\_\_  
(Current Band/First Nation)  
Band List/Registry Group, and the addition of my name to the \_\_\_\_\_  
(Admitting Band/First Nation)  
Band List/Registry Group.

**REQUESTER'S SIGNATURE:**

Signature: \_\_\_\_\_  
Dated: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Resides:  
On (own) reserve \_\_\_\_\_  
On (other) reserve \_\_\_\_\_  
On crown land \_\_\_\_\_  
Off Reserve \_\_\_\_\_