

APPLICATION  
NISGA'A CITIZENSHIP CARD (MINOR)

Last Name: \_\_\_\_\_

First and Middle Name: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ Gender:  Male  Female

Permanent Address: \_\_\_\_\_

Village: \_\_\_\_\_ B.C. Postal Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Nisga'a Village: \_\_\_\_\_

Nisga'a Citizenship No.: \_\_\_\_\_ Tribe: \_\_\_\_\_

Indian Registration No.: \_\_\_\_\_

I give permission to Nisga'a Lisims Government to use, disclose and share my personal information related to this Application Nisga'a Citizenship Card for purposes of administering the Treaty, Nisga'a law and the provision of programs and services. I understand that my personal information for my Application Nisga'a Citizenship Card, which subject to my consent, is stored securely and confidentially and will only be used and disclosed to the extent reasonable necessary. I understand why I have been asked for permission to use, disclose and share my personal information, and I am aware of the risks or benefits of consenting, or refusing to consent to the use, disclosure and sharing of my personal information. I understand that I may revoke this consent at any time.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian (Mother)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Name of Parent/Guardian (Mother)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian (Father)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Name of Parent/Guardian (Father)

**RENEWAL APPLICATION:** schedule photo-time with E&E clerk. **NEW APPLICATION:** complete Nisga'a Enrolment Application, attach & schedule photo-time E&E clerk.