

**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 \_\_\_\_\_