

## The People Who Spear Pollock

Peskotomuhkati



Nation

Passamaquoddy Recognition Group Inc.

Qonaskamkuk.com

## Membership Application

**Disclaimer:** This document includes the membership application form for use by potential members of Peskotomuhkati at Skutik. Your information will remain confidential within our internal operations. Only our Registrar department will be viewing and amending your information for application purposes. Peskotomuhkati at Skutik Executive Council and relevant departments within the Canadian and New Brunswick governments may also require viewing information for recognition and citizenship purposes.

### Application Information

#### **A. Personal and Contact Information**

This section includes the complete name and address of the applicant and any other info you are willing to share. This information will include applicants that are minors and include the age of the applicant, which will require that their application be signed by their parent/guardian.

*If available – applicant should include genealogical or ancestry charts*

**Name (Please Print):** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_

**Male** ☐

**Female** ☐

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Phone 1:** \_\_\_\_\_

**Phone 2:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Current Occupation or Educational Institution:** \_\_\_\_\_

**Educational level:** \_\_\_\_\_

**SIN/SS #:** \_\_\_\_\_

**Date of Birth (DD/MM/YYYY):** \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

#### Locations

**Headquarters:** 93 Miltown Blvd E3L 1G5 PO Box 144 **Tel:** (506) 466-2221 **Fax:** (506) 466-2217

**Satelite Office:** 3 Prince of Wales Street St. Andrews, NB E5B 3W9 **Tel:** (506) 529-4657

**Fisheries Office:** 9219 Route 3 Old Ridge, NB E3L 4W9

**Cheputneticook Lodge:** 1889 Route 735 Scotch Ridge, NB E3L 5K6

**USA:** PO BOX 1362 Calais, Me 04619

## B. Spouses Information

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

Status (Married, Divorced, Separated): \_\_\_\_\_

Address (Specify if different as yours): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone 1: \_\_\_\_\_

Phone 2: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Place of Birth: \_\_\_\_\_

## C. Family Information

The following documentation are acceptable for applying for membership:

- Status Cards
- Birth Records
- Baptismal Records
- Clan Records
- Church Records
- Family Trees
- Ancestry

Parents	Name	DOB DD/MM/YYYY	Place of Birth
Mother			
Father			

Maternal Grand-parents	Name	DOB DD/MM/YYYY	Place of Birth
Mother			
Father			

Paternal Grand-parents	Name	DOB DD/MM/YYYY	Place of Birth
Mother			
Father			

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Children (Names)	Gender	Community Residence	DOB DD/MM/YYYY	Place of Birth

#### D. Other Information

- The Peskotomuhkati organization will acknowledge receipt of your application.
- The membership committee or the Chief and Council will review your application.
- The organization will process the application within a reasonable timeframe.
- Notification to applicant if any additional information is required to complete the application process.
- Please be advised that in order to process your application, it may be necessary to conduct a personal interview with the applicant and their family to clarify your application. This will involve co-ordination between the applicant and the organization and the co-ordination will be the responsibility of the organization.
- We would encourage applicants to pass on this application process to other individuals or families that are interested in applying for membership to the Peskotomuhkati organization.
- If the applicant has any questions or concerns about their application, please contact the office, membership committee or the Chief and Council to address their issues.
- A copy

*Please attach and include any additional documents relevant to this process with your application. Email available at: [rsappier@hotmail.com](mailto:rsappier@hotmail.com)*

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*By signing this document, you are acknowledging that you have read the disclaimer and are giving consent to our registrar department to seek benefits on your behalf.*

**Note:** *Having your name on the Peskotomuhkati at Skutik list does not preclude you from receiving existing benefits nor disqualify you from receiving future benefits of an Indigenous Community you may already be a member of.*

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