

Application for Membership Gabriel Housing Corporation

Name: _____ Phone: _____

Address: _____ City: _____ P.C.: _____

Date of Birth: _____

I hereby apply for membership in Gabriel Housing Corporation and declare:

1. I am sixteen (16) years of age or older.
2. I live in the City of Regina or proximity as defined by the following boundaries:
 - ◆ west to and including the town of Grand Coulee
 - ◆ south to and including the town of Wilcox
 - ◆ east to and including the town of Balgonie
 - ◆ north to 12 miles from the city limits of Regina.
3. That I am a Metis:
 - ◆ I can provide proof of ancestry,
4. I am not an Indian as described in the Indian Act.
5. That I will make myself familiar with the Bylaws of Gabriel Housing Corporation and agree to conform to the Bylaws from time to time as passed by Gabriel Housing Corporation.

Date this _____ day of _____, _____ at _____ in the Province of Saskatchewan.

Application's Signature

Date Approved _____

Membership Number _____

Date Received Stamp:

Last Name/Surname _____ First _____ Middle _____
 Maiden Name (if applicable) _____

Please Complete, If and where possible, showing Aboriginal/Metis ancestry for YOURSELF

