



Dear Applicant:

Thank you for expressing an interest in NunatuKavut Community Council (known as NunatuKavut). There are three categories of membership: Full Member – Resident; Full Member – Non-Resident; and Alliance Member.

**A Full Member** is defined as a person of Inuit decent who is ordinarily a resident in one of the designated areas of Labrador (six months or more) and will be entitled to all of the rights, benefits and privileges NunatuKavut and cannot be a full member in any other Aboriginal organization.

**A Full Member – Non-Resident** is a person of Inuit descent who does not live in any of the designated areas of Labrador, but maintains contact with members living in any of the designated areas and cannot be a full member in any other Aboriginal organization.

**An Alliance Member** is defined as an Aboriginal person, ordinarily a resident in Labrador, who supports the objectives of NunatuKavut but who does not qualify for Full Membership. Alliance Members may benefit from Aboriginal representation, affirmative action, various government-sponsored services and programs (i.e. human resources development) and entrepreneurial business opportunities and cannot be a full member in any other Aboriginal organization.

It is important that all sections of the application form are filled out. An incomplete application cannot be considered by the Membership Committee and may be returned to the applicant. Please include the following:

- Copy of a piece of identification, such as a driver's license, passport or school ID;
- A long form copy of your birth certificate **OR your short form birth certificate combined with a baptism certificate;**
- Confirmation of your current residency, such as a driver's license or old phone/hydro bill, must be included with the application;
- A non-refundable **\$25.00** processing fee (If paying by cheque or money order, please make payee NunatuKavut);
- A digital photo (taken from the waist up, against a light background in Landscape) is required to prepare a photo ID membership card; it is necessary to have this photo in a good quality digital format. You can submit the photo with your application, through email or have it taken at your nearest NunatuKavut office.

**Please note we do not require original copies of supporting documents (photocopies are strongly encouraged).** Applications may be scanned & emailed, faxed, dropped off or mailed.

If you have any questions or concerns, or require assistance with the application process, please contact me at 709-896-0592 Ext. 242 or by email at [membership@nunatukavut.ca](mailto:membership@nunatukavut.ca).

Sincerely,

Sonya Blake  
Senior Membership Administrator

Enclosure(s)



# Application for Membership

*Please Print Clearly*

Membership Type: Resident  Non-Resident  Alliance

## Section A: Personal Information

Title (Mr/Mrs/Ms)	First Name	Middle Name	Last Name			
Maiden Name (if applicable)		Provincial Health Card # (e.g MCP)	DOB Month	Day	Year	Female <input type="checkbox"/> Male <input type="checkbox"/>
P.O. Box	Street Address	City/Town		Province	Postal Code	
Place of Birth		Home Community at Birth	Place of Permanent Residence			Length of Residency
Home Phone #	Cell Phone #	Work Phone #	Email Address			

Are you currently a member of: RCMP  Canadian Forces  (Please provide proof of membership)  
 Are you currently a full time student: Yes  No  (If yes, please provide proof, i.e. student ID)

## Section B: Spousal Information

Spouse's Last Name at Birth	Spouse's Given Name(s)	Date of Marriage	Place of Marriage
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## Section C: Connection to the Land

To which designated area(s) of Labrador are you most closely connected? (Check all that apply)

Straits  South-Eastern  Central  Western

Please explain your ties to the land, community or people in any of designated areas.

Please provide the names of two NunatuKavut members living in the designated area to whom you are related.

Name:	Community:
Name:	Community:

Please provide the names of two people living in the designated area who can confirm your connection to this region (different from the two names previously given).

Name:	Community:
Name:	Community:

Which of your ancestors listed on the following page have Inuit ancestry? Please provide any supporting documents that you may have. (Leave blank if unknown)

## Section D: Application Checklist

Digital Photo:	Identification:	Proof of Residency:	Non-Refundable Processing Fee:	Photocopy of the following documents:
Emailed <input type="checkbox"/>	Driver's Licence <input type="checkbox"/>	Driver's Licence <input type="checkbox"/>	\$25.00 <input type="checkbox"/>	Long-Form Birth Certificate <input type="checkbox"/>
Included <input type="checkbox"/>	<b>OR</b>	<b>OR</b>		<b>OR</b>
Taken by NunatuKavut <input type="checkbox"/>	Other Documentation <input type="checkbox"/>	Other Documentation <input type="checkbox"/>		Short-Form Birth Certificate AND Baptism Certificate <input type="checkbox"/>

\*Please note photo is not required for applicants under the age of 12.

**Declaration:**  
 I hereby confirm that I am not a member of any other provincial or territorial Aboriginal association(s).  
 I understand that as a member of NunatuKavut, I shall be bound to the best of my ability, to further the objectives, interests and influences, and shall observe the by-laws of NunatuKavut.  
 I certify that to the best of my knowledge, the information given on this application is true.

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Guardian Signature (if applicant is under the age of 16)

\_\_\_\_\_  
 Date

**Applications (with supporting documents) may be scanned & emailed OR faxed OR dropped off OR mailed to:**

NunatuKavut – Senior Membership Administrator  
 P. O. Box 460, Station C – 200 Kelland Drive  
 Happy Valley-Goose Bay, NL A0P 1C0

Email: membership@nunatukavut.ca  
 Fax: 709-896-0594



# Application for Membership

## Father's Family Tree

**Father:**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandmother**  
Given Name: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

**Great-Great-Grandfather**  
Given Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Date & Place of Death: \_\_\_\_\_

