

APPLICATION FOR ENROLMENT AS
A BENEFICIARY OF THE INUVIALUIT TRUST

Personal Information

Given Name(s)

Last Name

Former Last Name (if any)

Sex

Place of Birth

Date of Birth

Social Insurance Number

Territorial or Provincial Health Care Number

Contact Information

Daytime Phone Number

Evening Phone Number

Cell Number

E-Mail Address

Mailing Address

(City/Community)

(Postal Code)

Marital Status

Single () Divorced () Widowed () Common-Law () Married ()

Spouse Name

Date of Marriage (DD/MM/YY)

Land Claim Settlement

Are you a beneficiary of any other Canadian land claims settlement? (ex: Gwich'in, Nunavut etc.)

Yes () No () If YES, which one _____

Do you qualify for any other Canadian land claims settlement? (ex: Gwich'in, Nunavut, etc.)

Yes () No () If YES, which one: _____

I apply to be enrolled as a beneficiary of the Inuvialuit Trust. I solemnly declare that the statements made in this application are true. I consent to the collection, use and disclosure of my personal information as specified in the document "*Consent for Collection, Use and Disclosure of my Personal Information*" attached to this Application Form.

Signature

Date

Name:

Ethnicity:

Birthplace:

Sibling:

Ethnicity:

Birthplace:

Sibling:

Ethnicity:

Birthplace:

Father:

Ethnicity:

Birthplace:

Mother:

Ethnicity:

Birthplace:

Grandfather:

Ethnicity:

Birthplace:

Grandmother:

Ethnicity:

Birthplace:

Grandfather:

Ethnicity:

Birthplace:

Grandmother:

Ethnicity:

Birthplace:

Great
Grandfather:

Great
Grandmother:

Great
Grandfather:

Great
Grandmother:

Great
Grandfather:

Great
Grandmother:

Great
Grandfather:

Great
Grandmother:

ADDITIONAL INFORMATION FORM

NOTES:

- **Do not** complete this form if you were born in Aklavik, Inuvik, Paulatuk, Sachs Harbour, Tuktoyaktuk or Ulukhaktok.

- For the purpose of this form, “Inuvialuit Settlement Region” includes communities of Aklavik, Inuvik, Paulatuk, Sachs Harbour, Tuktoyaktuk or Ulukhaktok.

NAME OF APPLICANT: _____

Was your mother a resident of the Inuvialuit Settlement Region at the time of your birth?
Yes () No ()

If No, did your mother give birth outside of the Inuvialuit Settlement Region for medical reasons?
Yes () No ()

Did you reside in the Inuvialuit Settlement Region for a total of ten (10) years?
Yes () No ()

If yes, please indicate below the years and community or communities in which you resided those ten (10) years:

Years	Community

If there is any other information that could help the Enrolment Committee understand your Inuvialuit ancestry, please provide it in the box below.

CONSENT FOR COLLECTION, USE AND DISCLOSURE OF MY PERSONAL INFORMATION

In order to fulfill its mandate under the Inuvialuit Final Agreement (IFA), Inuvialuit Regional Corporation (IRC) needs to collect, use and disclose certain personal information about you. The federal legislation protecting your privacy requires that IRC obtain your consent to collect, use and disclose your personal information for identified purposes. We invite you to read this document carefully.

- A. **PURPOSES.** IRC will collect your personal information to determine if you qualify for enrolment, and once you are a beneficiary of the Inuvialuit Trust, for various purposes relating to IRC's pursuit of its mandate pursuant to the IFA which is to represent the Inuvialuit and their rights and benefits.
- B. **COLLECTION.** IRC will collect personal information about you, including:
1. your name, address, phone numbers and other contact information;
 2. your date of birth, place of birth, parents, ancestry information, marital information, children, social insurance number, and health care number; and
 3. your current and past residences.

IRC may also collect personal information from other sources including federal, territorial, provincial and aboriginal governmental organizations or other third parties.

C. **USE AND DISCLOSURE.**

1. IRC will use and disclose your personal information for various purposes relating to IRC's pursuit of its mandate pursuant to the IFA.
2. IRC may disclose your personal information to sport, recreation or educational institutions and organizations desirous of confirming the ethnic origins of their participants, members or students.
3. IRC may use and disclose your personal information for statistical, scholarly study or research purposes deemed by IRC to be in the best interest of the Inuvialuit.
4. IRC may disclose your name, mailing address and beneficiary status where required by law.
5. IRC may disclose your date of birth, place of birth, provincial or territorial health care number and associated community to provincial, territorial or federal health organizations who require the information to provide you with a non-insured health number.
6. IRC may confirm your and your children's enrolment status and ancestry in connection with child custody and adoption proceedings.
7. IRC may disclose your name and mailing address to Inuvialuit and Inuit organizations such as the Inuvialuit Communication Society and Inuit Tapiriit Kanatami to be used for communication purposes.
8. IRC may disclose your name, associated community, enrolment status, and beneficiary number to the Inuvialuit Community Corporations, Hunters and Trappers Committees, the Gwich'in Tribal Council and other aboriginal organizations for membership list updating and verification purposes.
9. IRC may disclose your name, age, associated community, enrolment status, elder status and beneficiary number to the Inuvialuit Community Corporations to facilitate the administration of benefits, such as IHAP benefits, and the admission to committee, such as an elders' committee.
10. IRC may disclose your name, age and associated community to Canadian North in furtherance of the administration of the Pivut Fare Program.
11. IRC may disclose the enrolment status and social insurance number of a deceased Inuvialuit to funeral service providers.

Your personal information collected in one corporate division or branch of IRC may be shared with other divisions of the Inuvialuit Corporate Group for training, employment and business purposes, and for the other purposes identified above.

VITAL STATISTICS CONTACT INFORMATION

Northwest Territories - Vital Statistics

Vital Statistics
Department of Health and Social Services
Bag 9
Inuvik NT X0E 0T0
Telephone: (867) 777-7400
Telephone (Toll Free): 1-800-661-0830
Fax: (867) 777-3197
Email: hsa@gov.nt.ca
Website: www.hss.gov.nt.ca/vital-statistics

Alberta - Vital Statistics

Service Alberta, Vital Statistics
PO Box 2023
Edmonton AB T5J 4W7
Telephone: (780) 427-7013
Telephone (Toll Free within AB): (780) 310-0000 followed by (780) 427-7013
Fax: (780) 401-4088
Email: vs@gov.ab.ca
Website: www.servicealberta.gov.ab.ca/VitalStatistics.cfm

Ontario - Vital Statistics

Office of the Registrar General
PO Box 4600 189 Red River Road
Thunder Bay ON P7B 6L8
Telephone: (416) 325-8305
Telephone (Toll Free Outside Ontario): 1-800-461-2156
Fax: (807) 343-7459
Website: www.serviceontario.ca

New Brunswick - Vital Statistics

Service New Brunswick Vital Statistics
PO Box 1998
Fredericton NB E3B 5G4
Telephone: (506) 453-2385
Telephone (Toll free within N America): 1-888-762-8600
Fax: (506) 444-4139
Website: www.snb.ca/e/1000/1000-01/e/index-e.asp

Saskatchewan - Vital Statistics

Health Registries
2130 11th Avenue
Regina SK S4P 0J5
Telephone: (306) 787-3251
Telephone (Toll Free): 1-800-667-7551
Fax: (306) 787-8951
Email: vitalstatistics@ehealthsask.ca
Website: www.ehealthsask.ca/vitalstats/Pages/default.aspx

Prince Edward Island - Vital Statistics

Vital Statistics
126 Douses Road
Montague PE COA 1R0
Telephone: (902) 838-0880
Telephone (Toll Free): 1-877-320-1253
Fax: (902) 838-0883
Website: www.gov.pe.ca/vitalstatistics/

Yukon Territory - Vital Statistics

Vital Statistics
PO Box 2703
Whitehorse YT Y1A 2C6
Telephone: (867) 667-5207
Telephone (Toll Free within Yukon): 1-800-661-0408
Fax: (867) 393-6486
Email: Vital.Statistics@gov.yk.ca
Website: www.hss.gov.yk.ca/programs/vitalstats

British Columbia - Vital Statistics

Vital Statistics Agency
PO Box 9657 Stn Prov Govt
Victoria BC V8W 9P3
Telephone: (250) 952-2681
Fax: (250) 952-9074
Website: www.vs.gov.bc.ca

Manitoba - Vital Statistics

Vital Statistics Agency
254 Portage Avenue
Winnipeg MB R3C 0B6
Telephone: (204) 945-3701
Telephone (Toll free): 1-866-949-9296
Fax: (204) 948-3128
Email: vitalstats@gov.mb.ca
Website: vitalstats.gov.mb.ca

Quebec - Vital Statistics

Registrar of civil status

Le Directeur de l'État Civil
2535, boulevard Laurier
Québec QC G1V 5C5
Telephone: (418) 644-4545
Website: www.etatcivil.gouv.qc.ca/en/default.html

Quebec Institute of Statistics

Information and Documentation Centre
200, chemin Sainte-Foy, 3rd Floor
Québec QC G1R 5T4
Telephone: (418) 691-2401
Telephone (Toll free): 1-800-463-4090
Fax: (418) 643-4129
Website: www.stat.gouv.qc.ca/default_an.html

Nova Scotia - Vital Statistics

Service Nova Scotia and Vital Statistics
PO Box 157
Halifax NS B3J 2M9
Telephone: (902) 424-4381
Telephone (Toll Free within NS): 1-877-848-2578
Fax: (902) 424-0678
Email: vstat@gov.ns.ca
Website: www.gov.ns.ca/snsmr/vstat

Newfoundland/Labrador - Vital Statistics

Vital Statistics Division
PO Box 8700
St. John's NL A1B 4J6
Telephone: (709) 729-3308
Fax: (709) 729-0946
Email: vstats@gov.nl.ca
Website: www.gs.gov.nl.ca/birth/index.html

Nunavut - Vital Statistics

Department of Health and Social Services
Bag 003
Rankin Inlet NU X0C 0G0
Telephone: (867) 645-8001
Telephone (Toll Free within NU): 1-800-661-0833
Fax: (867) 645-8092
Email: info@gov.nu.ca
Website: www.gov.nu.ca/health/information/birth-certificate