

If you answered YES to the above question, please indicate your area(s) of interest:

- Culture Youth Membership / Registration Language Revitalization Newsletter/ website Education
 Health Government Economic Development Fundraising Children & Family Finance
 Harvesting & Environment Policy & Planning Homelessness Other (please specify) _____

**Membership is \$20 for 5 years per member and includes your membership card. E-mail a digital photo to our Secretary at: secretary.vmcs@gmail.com and please send a cheque or money order to:
 VMCS, 989 Reed Road, Gibsons, BC V0N 1V7**

By submitting this form you hereby declare that the information contained and supplied in the Vancouver Métis Citizens Society Application Form to be true, to the best of your knowledge. You agree to the conditions set out in the VMCS Constitution and Bylaws, which are conditional upon this application. You will inform the Vancouver Métis Citizens Society of any address or contact changes.

*Citizenship requirement:

Métis means a person who self-identifies as Métis, is of historic Métis Nation Ancestry, is distinct from other Aboriginal Peoples, and is accepted as a Metis citizen by a Métis Community.

1. "Historic Métis Nation" means the Aboriginal people then known as Métis or Half-Breeds who resided in Historic Métis Nation Homeland.
2. "Historic Métis Nation Homeland" means the area of land in west central North America used and occupied as the traditional territory of the Métis or Half-Breeds as they were then known.
3. "Métis Nation" means the Aboriginal people descended from the Historic Métis Nation, which is now comprised of all Métis Nation citizens and is one of the "aboriginal peoples of Canada" within Section 35 of the Constitution Act of 1982.
4. "Distinct from other Aboriginal Peoples" means distinct for cultural and nationhood purposes.

I agree with the terms set out above and I will remain a member in good standing as set in the Vancouver Métis Citizens Society's Constitution and Bylaws.

Signature of Applicant _____

Date _____

For office use only

Director

2 VMCS directors signatures required for approval:

Director

Received Application Date:

Comments:

Approval Date :

Revised JUNE 2012