



Gwich'inat Eenjit Gàdatr'igwijiłcheii Gidilii

Gwich'in Tribal Council

APPLICATION FOR GWICH'IN PARTICIPANT I.D. CARD

<p>The information you provide on this document is collected under the authority of the Gwich'in Final Agreement for the purpose to certify that you are enrolled as a participant in the Enrolment Register pursuant to Chapter 4 of the Gwich'in Land Settlement Act (Bill C-94) and are a Gwich'in within the meaning of the said Agreement and Act.</p>				FOR OFFICE USE ONLY							
				_____ / _____ Enrolment Number Associated Community							
Given First Name(s):						Last Name:					
Date of Birth (MM-DD-YYYY):						Place of Birth:					
Height:			Gender:								
Mailing Address											
P.O. Box		Apt./Unit		Street No.		Street Name					
City/Town			Country			Province/State			Postal Code		
Signature:				Date: (MM-DD-YYYY)				Telephone No:			

Applying By Mail	
<p>Please attach to this application a photograph (approx. 2" x 2") of the head and shoulders, taken within the last six months and send to:</p> <p style="text-align: center;">Gwich'in Tribal Council, Attention: Enrollment P.O. Box 1509, Inuvik, NT X0E 0T0</p>	
Applying By Email	
<p>Send an Email to enrolment@gwichintribal.ca. Attach the following:</p> <ul style="list-style-type: none"> this application form a clear digital photograph of face and shoulders on a white background. 	