

Consent to Release Information

(to representative(s) that will be assisting you with completing your application)

By completing this form, you authorize the individual(s) listed below to contact the Métis Nation-Saskatchewan Registry (MN-SR) on your behalf regarding your citizenship application. By naming the individual(s) below, the MN-SR will recognize that the named individual(s) has your permission to contact the MN-SR to make inquiries into your application for Métis Citizenship.

This permission does <u>not</u> extend to the release of genealogical records. A Genealogical Request Form must be completed by you, the applicant, in order to receive copies of genealogical documents and/or information related to your application. The release of genealogical information, and any associated costs, will be made at the discretion of the MN-SR.

I, give Print Full Legal Name	
permission to discuss pertinent information related to the compleapplication with the MN-SR. The listed individual(s) may also updated documents, and/or inquire into the status of my application with understand that by signing this form, my information may be rele	ate my information, provide the MN-SR on my behalf. I
I acknowledge that this consent will be valid until I have completed the application process, or for a maximum period of five years from the date this was signed—whichever comes first. If I choose to revoke the <i>Consent to Release Information</i> , I may do so at any time by contacting any of the MN-SR offices and indicating my wish to revoke consent to one and/or all of the individuals listed above. I also acknowledge that this form is not intended as a substitute for Power of Attorney.	
X Signature of individual giving authorization	Date

Please submit a copy of this form to the Métis Nation-Saskatchewan Registry (MN-SR) by email, mail, or fax.

209-2121 Airport Drive | Saskatoon, SK | S7L 6W5 | Ph 306.343.8391 | Tf 1.833.343.8391 | Fx 306.343.8398 | info@mnsregistry.ca