

Métis Nation-Saskatchewan Update Form: Change of Address

| DATE OF BIRTH: / | / MN-S CITIZENSHIP #: |
|---|---|
| EMAIL: | |
| | SECONDARY PHONE: |
| | |
| CITY/TOWN: | PROVINCE: SK POSTAL CODE: |
| Effective Date: | |
| | |
| PREVIOUS MAILING ADDRESS: | |
| CITY/TOWN: | PROVINCE: SK POSTAL CODE: |
| Names of Minor Children Needing Ad | ddress Updates: |
| FULL NAME OF CHILD: | DATE OF BIRTH: // |
| FULL NAME OF CHILD: | DATE OF BIRTH: / |
| FULL NAME OF CHILD: | DATE OF BIRTH: / |
| FULL NAME OF CHILD: | DATE OF BIRTH: / / YYYY / MM / DD |
| By filling out and signing this form required by the MN–S Registry from | YYYY / MM / DD n you are agreeing to the same policies, consents, and permis n new applicants for Métis Citizenship (these can be found in our o vailable on our website metisnationsk.com). |
| Signature: | Date: |