



Freehorse Family Wellness Society

Suite 204, 11710 Kingsway Avenue, Edmonton, AB T5G 0X5

Phone: (780) 944-0172 Fax: (780) 944-0176

Canada Wide Toll Free: 1-800-411-9658

E-mail: general@freehorse.org

AUTHORIZATION OF INFORMATION RELEASE FORM

Fill out this form if you are a Status Indian affiliated with one of the following Alberta-based First Nations AND ineligible for funding from that First Nation because your status is a result of Bill C-31:

Bearspaw	Beaver F.N.	Beaver Lake	Blood Tribe	Chiniki	Cold Lake	Driftpile
Frog Lake	Goodfish Lake	Wesley	Kapawe'no	Kehewin	Long Lake	Peigan
Saddle Lake	Sawridge	Sucker Creek	Swan River	Tall Cree	Tsuu T'ina	

This is a release form that authorizes *Indian and Northern Affairs Canada (INAC)* to release to *Freehorse Family Wellness Society* verification of your Indian Status. This form must be completed, signed and dated. Return to *Freehorse Family Wellness Society*.

APPLICATIONS THAT ARE MISSING REQUIRED DOCUMENTS, INCLUDING THIS FORM, MAY NOT BE PROCESSED.

RELEASE OF INFORMATION

I, _____, hereby authorize Indian and Northern Affairs Canada to provide *Freehorse Family Wellness Society* with confirmation that I have/have not received my Indian Status as a result of the amendments to the Indian Act (1985), also known as Bill C-31.

Surname _____

Given name(s) _____

Alias(s) [maiden name if applicable] _____

Date of Birth: _____
Year Month Day

Indian Registry number: _____
Band # Family # Position #

Signature _____ Date _____

*OFFICE USE ONLY:

STATUS: C-31 Verified F.O. Signature _____ Date _____

NWT

Inuit

Michel Band

Heart Lake

Smiths Landing