

APPENDIX A



FSIN

Band Membership Verification Form

The following is a list of all athletes who are participating in the FSIN Sport Championship with the _____ First Nation/Band. As a requirement of the FSIN Sport Championships, all of our participants must be verified by the band membership clerk.

NAME	DOB (M/D/Y)
1.	
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As Band Membership Clerk of _____ First Nation, I hereby declare that we have performed the required treaty check and verify that the above listed participants are from the above mentioned First Nation.

_____	_____	_____
Band Membership Clerk	Signature	Date
_____	_____	_____
Chief/Councillor	Signature	Date