



## Champagne And Alshihik First Nations

### Yukon Land Claims Enrollment Application

**Purpose:** to ensure the enrollment application is completely filled out; and all supporting documents are attached.

The CAFN Council reviews all enrollment applications. Approval of the enrollment application will not be granted if the application information is not completely filled in, and/or if the supporting documents are not attached.

#### Check List::

- All information requested on the application form is completely filled in
- The application is dated, and signed by the applicant
- Contact information is included – telephone number
- Applications on behalf of minors - children 18 years and younger is signed by both parents; and/or by the legal guardian(s)
- The family tree page is completely filled in to the best of your knowledge

#### Supporting Documents:

- a large size birth certificate which shows the names of both parents (a photocopy will be sufficient, *except for the Indian Status Consent Form application, DIAND will only accept the original birth certificate – they will mail back to you the original*)
- legal notice of name change
- marriage certificate
- for minor children if a custody order is in place - a photocopy of the legal custody order of minor children
- for minor children in care – the legal guardianship



**CHAMPAGNE AND AISHIHIK FIRST NATIONS**

**YUKON LAND CLAIMS ENROLLMENT**

**AFFIRMATION FORM**

I, \_\_\_\_\_ of this  
(given name) (surname)

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

have completed an Enrollment Application to be enrolled for the  
Yukon Land Claim Settlement and **I wish to be enrolled with the**  
\_\_\_\_\_ **First Nation.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
in the Community of \_\_\_\_\_.

APPLICANT'S SIGNATURE: \_\_\_\_\_  
(parent/s, legal guardians sign on behalf of minors)

APPLICANT'S BIRTHDATE: \_\_\_\_\_

APPLICANT'S WITNESS: \_\_\_\_\_



DATE RECEIVED:



**CHAMPAGNE AND AISHIHIK FIRST NATIONS**

**SCHEDULE A**

**APPLICATION FORM FOR ENROLLMENT UNDER CHAMPAGNE AND AISHIHIK FIRST NATION FINAL AGREEMENT**

**INFORMATION ABOUT THE PARENT/GUARDIAN**

Are you the parent/guardian of a minor child applying on their behalf to have the child enrolled under CAFN?

YES  NO

If **NO**, you do not need to fill out this section.

If **YES**, please fill out the information below.

Are you (the parent/guardian) currently enrolled with CAFN: YES  NO

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City Province Postal Code/ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

If you are over 17 years of age (ie. 18+), you can apply on your own behalf.

**INFORMATION ABOUT THE APPLICANT**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Other Legal Names: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City Province/Postal Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Are you adopted: YES  NO

*Please provide legal documentation*

Canadian Citizen: YES  NO  OTHER: \_\_\_\_\_

Eligible for STATUS under the Indian Act: YES  NO  Status #: \_\_\_\_\_

Name of Mother: \_\_\_\_\_ Name of Father: \_\_\_\_\_

Have you ever been enrolled under CAFN: YES  NO

Did you terminate/transfer enrollment to another First Nation: YES  NO

If yes what was the date: \_\_\_\_\_

Are you enrolled/do you receive benefits under any other First Nation Final Agreement or Land Claim Settlement?

(In or outside Canada)? YES  NO

If yes, which First Nation Final Agreement or Land Claim Settlement?

#### **PART B – ESTABLISHING ELIGIBILITY FOR ENROLLMENT UNDER CAFN**

- **Lineal means of a family relationship that includes mothers, fathers, daughters, sons, grandparents, grandchildren etc., but not siblings, cousins, etc...**

**1. Are you a lineal descendant of Champagne and Aishihik dān (person)?**  
YES  NO

**2. If yes who are you related to?**  
*Please fill out and attached family tree.*

**3. Do you (the applicant) have a current and substantial connection to CAFN?**  
*Please explain fully and in detail:*

- a) Do you have a family connection to a traditional Champagne and Aishihik First Nations dān nàjè yu (settlement) (ie. Dakwākāda (Haines Junction), The Yānlin Chemi (Canyon Creek), Nākhu/Takhini (Kusawa/Takhini), Chu'ena Kéyi (Hutchi), Āsheyi (Aishihik), Shadhāla (Champagne))? Please explain in full detail.

What is your family connection?

To which traditional CAFN dān nàjè yu (settlement) are you connected and if so how are you connect?

How often do you visit the dān nàjè yu (settlement)?

Do you take part in gatherings in your dān nàjè yu (settlement) (ie. potlatches, general assemblies, community meets and/or celebrations/events)?

Do you give back to the dān nàjè yu (settlement) and if yes how do you give back/contribute to the community?

b) Do you have a family kwändür (story) about life within Champagne and Aishihik First Nations dān nàjè yu (settlement) or village and are you willing to fulfill your responsibility to keep your kwändür alive within your family and community? Please explain fully and in detail.

c) Do you have an affiliation with a Champagne and Aishihik First Nations clan?

d) Please explain which clan?

e) Do you have a Champagne and Aishihik First Nation dan yizhi (traditional name) that was bestowed upon you at birth or at a Potlatch and if do what is your traditional name? Please explain fully and in detail.

f) Do you speak or understand a First Nations language? Please explain fully and in detail.

**SIGNATURE OF APPLICANT**

*I certify that my answers are true and complete to the best of my knowledge.*

\_\_\_\_\_  
Signature of applicant or (see below)

\_\_\_\_\_  
Date signed

**\*APPLICANTS PARENT/LEGAL GURADIAN/ADOPTIVE PARENT (SIGN ON BEHALF OF MINOR)**

\_\_\_\_\_  
Mothers signature

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date signed



CHAMPAÑE AND AISHIHK FIRST NATIONS

# Family Tree of Applicant

Maternal

Name of Applicant

Paternal

Mother:		Father:	
<b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____	<b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____	<b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____	<b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandmother:</b> Origin: _____ DOB: _____ YFN ID #: _____ <b>Great</b> <b>Grandfather:</b> Origin: _____ DOB: _____ YFN ID #: _____

*\*\*YFN (Yukon First Nation) ID# : Please leave blank if unknown*

**Schedule D  
APPLICANT DECLARATION**

In the matter of an application under section 9 of the *Āghàolān* ("my relatives"), the "Enrollment Act" by \_\_\_\_\_ (here insert the name of the applicant) to become enrolled under the Champagne and Aishihik First Nations Final Agreement:

I \_\_\_\_\_ (here insert name of the applicant (or parent, legal guardian/ adoptive parent)) of \_\_\_\_\_ (here insert your usual residential address) do solemnly and sincerely declare as follows:

- I am the (applicant OR the parent/legal guardian/adoptive parent)  
  
\_\_\_\_\_ (insert your name here) named in the Form of Application for enrollment under the Act and the Regulation to which this declaration relates.
- All the information provided by me in the application form is to the best of my knowledge, information and belief true, accurate, correct and complete.
- All supporting documents, which accompany my application are either original documents or true copies and/or certified copies of the original documents which are themselves authentic.
- Insofar as there is any difference between my name/the name of the applicant as it appears in the said Form of Application and/or in this declaration and/or in the various documents which accompany same I say that I am/the applicant is one and the same person as the person mentioned therein and I will if called upon so to do by the Enrollment Officer or by the First Nations Council, I will provide further evidence to that effect.
- I undertake and agree to produce for inspection and comparison the originals of all documents, which accompany this said application when called upon so to do.
- I am aware that it is an offence under the Act punishable by a fine and/or imprisonment to make a false representation, commit an act of fraud, or knowingly conceal material facts or circumstances and to become enrolled or to assist another in becoming enrolled under the Champagne and Aishihik First Nations Final Agreement as a result of such false representation, act of fraud or by concealing material facts or circumstances.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath by virtue of the *Canada Evidence Act*.

DECLARED BEFORE ME (the Witness) at the City of \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

this \_\_\_\_\_ day

\_\_\_\_\_  
Name of Witness

of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness address

\_\_\_\_\_  
Signature of Witness