



Rainy River First Nations
MANITOU RAPIDS

Application for Membership of Rainy River First Nations: UPDATED

Boozhoo Members,

Attached is the new application package to apply for Membership at Rainy River First Nations. Amendments to the Membership Code are voted on by the Members of the Nation.

However, per **section IV.89.(h)** of the Membership Code of Rainy River First Nations (the Code), appendices can be amended or added by the Membership Committee within the scope of the most up to date version of the Code. I.e. requirements for application cannot be changed without a vote of the Members through the amendment process laid out in **section I** of the Code:

23. (h) "...In the event that, for the purpose of ensuring appropriate administration of the Code, the appendices require amendment or further appendices are required, the Membership Committee shall be entitled to make such amendments without the need for formal amendment pursuant to Section 5 (Enactment and Amendment of the Code);"

Section IV; 23(h) pgs. 7 & 8

After reviewing and processing the backlog of membership applications, the Membership Committee reviewed the application form/package and made changes to it to ensure that the information submitted would be more substantial to aid in decision making.

Thus, at a duly convened meeting of the Membership Committee on **April 27, 2026**, a motion was passed to change the application appendices from the original application forms to this new Application Package attached.

All applications received prior to April 27th, 2026, will still be processed using the original application format.

For more information on applying for Membership, please contact Membership Registrar, Gwen Medicine at membership@manitourapids.ca or 807-482-2479 ext. 268

For information or questions regarding the Membership Code, please contact Lauren Hyatt, Policy and Communications Analyst at lauren.hyatt@manitourapids.ca or 807-482-2479 ext. 214.

Miigwech,

Lauren Hyatt

Policy & Communications Analyst

RAINY RIVER FIRST NATIONS

APPLICATION FOR BAND MEMBERSHIP

PLEASE ENSURE THAT ALL SECTIONS ARE COMPLETED & THE RELEVANT BOXES CHECKED.
IF SOMETHING DOESN'T APPLY TO YOU PLEASE WRITE "NA"

I, _____, am applying for Membership in Rainy River First Nations, OR

I, _____, am applying as a parent/guardian on behalf of the Applicant who is under eighteen (18) years of age.

Table with 3 columns: First, Middle, Last

Applicant's date of birth: Month _____ Day _____ Year _____

Certificate of Indian Status Card Registry No. _____

I am applying for Membership based on (check all that apply):

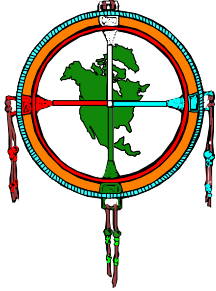
- Section 8(b) (i.e., I was eligible to be a Member on the date prior to the day on which RRFN assumed control of its Membership List)
Section 8(c) (i.e., I have at least one parent who has Membership or is/was entitled to have Membership under this Code, whether that parent is living or deceased.)

Full name and birth dates, of parents(s) and grandparents, and through whom Applicant is entitled to Membership.

Form with rows for Mother, Father, Maternal Grandmother, Maternal Grandfather, Paternal Grandmother, Paternal Grandfather, each with fields for Name, Date of Birth, and Registry #.

Supporting Documentation required to be included with application:

- Birth Certificate
Three letters of support
Affidavit a) disclosing any criminal convictions, if applicable; b) stating whether the individual has been subject to a penalty imposed by court, administrative tribunal, or regulatory body, if applicable; (c) attesting to the completion of any sentence or penalty, if applicable; (d) disclosing if there are other matters in the individual's past or present circumstances that may place the individual's character at issue
Affidavit renouncing membership in his or her former First Nation, Inuit Community or any Metis Organization and evidence that the former will release the individual from its membership list if applicant is accepted by Rainy River First Nations
Provide affidavit setting out kinship to Rainy River First Nations and Kinship Chart
Affidavit Affirming Membership to Rainy River First Nations Application Package



Rainy River First Nations Manitou Rapids

P.O. Box 450
Emo, Ontario P0W 1E0
Phone: (807) 482-2479
Fax: (807) 482-2603

Affidavit of Disclosure To Rainy River First Nations

I, _____
(Name of Applicant)

Mailing Address:

Street Apt # P. O. Box

City/Town Province/State Postal Code/Zip Code

Disclose that:

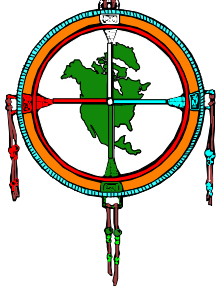
- I have no criminal convictions
- I have not been subject to penalty imposed by court, administrative tribunal, or regulatory body
- I have not had, or had to complete any sentences or penalty
- I have no other matters in the past or present circumstances that may place my character in question

And do hereby declare and affirm the above is true and correct.

Date: _____

Signature: _____

Printed Name: _____



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Affidavit Renouncing Membership

Name of Applicant: _____

Birthdate: _____
Month Day Year

This is to confirm that I, _____
(name of applicant), am applying to transfer my membership to **Rainy River First Nations**. I hereby consent to renounce my membership from _____ (name of First Nation, Inuit community, any Metis Organization where currently registered) and if accepted by Rainy River First Nations, have my name removed from my former First Nation, Inuit community, or any Metis Organization membership list.

Signature of Applicant:

Or

Signature of parent/guardian if applying on behalf of and Applicant who is under eighteen (18) years of age:

_____ Date

Under section 10 ii) of Rainy River First Nations 2018 Membership Code, when individuals wish to transfer their membership, they are required to provide an affidavit renouncing membership in his or her former Band, Inuit community or any Metis Organization. If you are wishing to transfer, you will need to sign this form and return it to the RRFNs Membership Registrar at membership@manitourapids.ca as part of your application package. For more information please call (807) 482-2479.



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Membership Release Form

Name of Applicant: _____

Membership Number: _____

Date of Birth: _____
Month Day Year

This is to confirm that _____ (name of First Nation, Inuit community or Metis Organization where currently registered) has been notified of _____ (Name of Applicant) wish to transfer their membership to **Rainy River First Nations**.

We hereby consent to release the individual from our membership list. When we receive confirmation from Rainy River First Nations that the individual has successfully become a member, at that time, we will remove them from our band list.

First Nation, Inuit community or Metis Organization:

Representative's Name: _____

Signature: _____

Date: _____

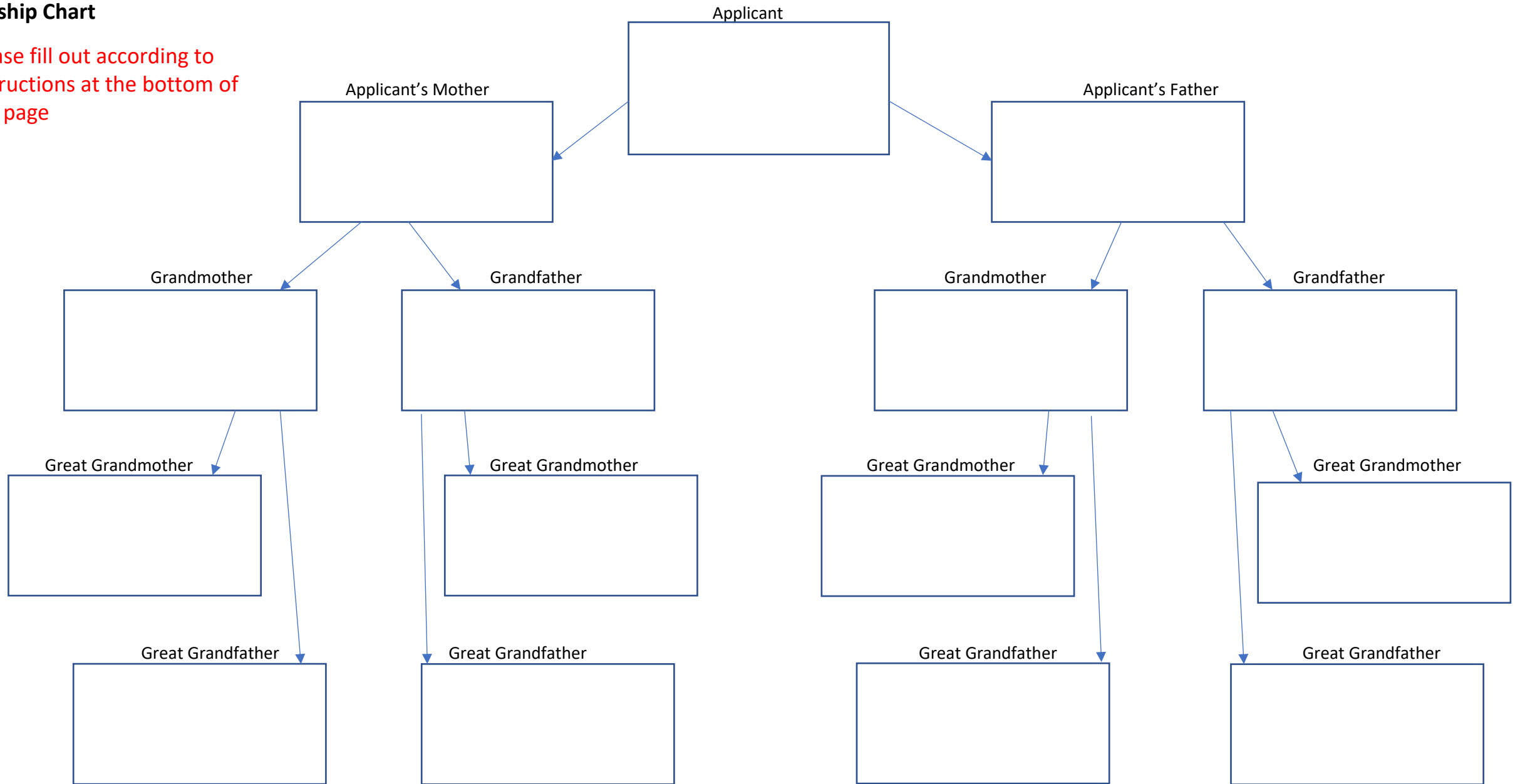
Phone: _____

Email: _____

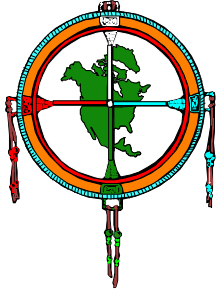
Under section 10 ii) of Rainy River First Nations 2018 Membership Code, when individuals wish to transfer their membership, they are required to provide evidence that their First Nation, Inuit community or any Metis Organization will release them from its membership list. Once this form is complete, please return it to the RRFNs Membership Registrar at membership@manitourapids.ca. If the applicant is over 18 years of age the actual transfer will not happen until their two-year probationary period is complete and they are accepted at RRFNs. For more info please call (807) 482 – 2479.

Kinship Chart

Please fill out according to instructions at the bottom of this page



- Please Include Name, Birth date and Band Registry Number in each block
- If the persons on either side are Not Indigenous, please write "NI" instead of a Band Registry number. @ o 'Vo ' ' k
- Please ensure both sides are filled out even if the persons are Not Indigenous (NI) or Not Status (NS)



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Affidavit Setting Out Kinship To Rainy River First Nations

I, _____
(Name of Applicant)

Mailing Address: _____
Street Apt # P. O. Box

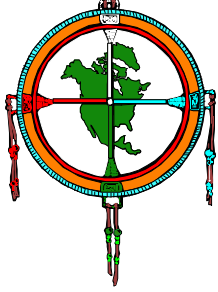
City/Town Province/State Postal Code/Zip Code

Do hereby declare and affirm that the accuracy of the attached Kinship Chart is true and correct.

Date: _____

Signature: _____

Printed Name: _____



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Affidavit Affirming Membership To Rainy River First Nations Application Package

I, _____
(Name of Applicant)

Mailing Address: _____
Street Apt # P. O. Box

City/Town Province/State Postal Code/Zip Code

Do hereby declare and affirm that the accuracy of all of the information within this application package is true and correct.

Date: _____

Signature: _____

Printed Name: _____