

Nunavik Enrolment Office

P.O. Box 179

Kuujjuaq, Nunavik (Quebec) J0M 1C0 Tel: (819) 964-2925 Fax: (819) 964-0458

Website: www.makivik.org

Form G Declaration of Inuit Customary Adoption Form

Nunavik Enrolment Office established under the authority of the Makivik Board of Directors is responsible to maintain the Nunavik Inuit Beneficiaries Register

Section A		IDEN.	TIFICATION	OF THE CHILD						
Family Name at Birth		Middle Name at Birth			Given Name at Birth			Female Male		
No. 5-will No.	N -1		N M	idella Nacca at Ada	-4:		N	Ciara N	N	
New Family Name at A	Αυυριιστι			New Middle Name at Adoption			New Given Name at Adoption			
Date of Birth (yy/mm/dd)		Place of Birth		Beneficiary No.			Civil Status Regis			n No.
						. 4				
Present Address of F	of Residence of the Child		d	City	City		Province/Territory		Postal Code	
Community of Residence	Сог	Community Affiliation		Social Insurance No.				Health Care Card No.		rd No.
Date of Adoption (yy/mm/dd) Total Years								Health Canada olicable)		
Section B		INFO	RMATION O	F THE BIOLOG	ICAL	PARE	NTS			
Maiden Name of Biologi	cal Mother		Middle	Name of Biological	Mothei	r	Give	n Name(s) of Biologic	al Mother
							Home Phone	No.		
Date of Birth (yy/mm/dd)		Place of Birth		Beneficiary No.		-	Work Phone No.			
Address of Residence			City	Province/Terr	itory	Po	ostal Code		ears of Res	idence "Outside applicable)
Community of Residence Marital Status Single	Comr Marri	munity Af	ffiliation Common L	Social Insurance	· No.	He	alth Care Ca	d No.		ımber Health (if Applicable)
Marital Status Single Separated	Divor		Widow	aw			Da	te of Even	nt (yy/mm/c	ld)



Declaration of Inuit Customary Adoption Form

Section B (cont'd)	INFO	RMATION OF TH	IE B	BIOLOGICAL PARE	NTS				
Name of Biological I	ather	Middle	e Nar	me of Biological Father		Giver	n Name(s) of Biological Father	
		·				Home Phone	No.		
Date of Birth (yy/mm/dd)	P	Place of Birth		Beneficiary No.		Work Phone N	e No.		
Address of Residence		City		Province/Territory	Po	ostal Code	Total Years of Residence "Outside Territory" (if applicable)		
Community of Residence Marital Status Single	Married		Law	Social Insurance No.	Н	ealth Care Card		"N" Number Health Canada (if Applicable)	
Separated	Divorce	d Widow				Date of Event (yy/mm/dd)			
Section C	INF	ORMATION OF	THE	ADOPTIVE PARE	NTS				
Maiden Name of Adopti	ve Mother	Middle	. Nar	me of Adoptive Mother		Giver	ı Name(s) of Adoptive Mother	
						Home Phone	No.		
Date of Birth (yy/mm/dd)		Place of Birth		Beneficiary No.		Work Phone N	No.		
Address of Residence		City		Province/Territory	P	ostal Code	1	Years of Residence "Outside erritory" (if applicable)	
Community of Residence	Comn	nunity Affiliation		Social Insurance No.	Н	ealth Care Card	No.	"N" Number Health Canada (if Applicable)	
Marital Status Single Separated	Married Divorce		Law						
Separateu	Divorce	u Widow				Date	e of Ever	nt (yy/mm/dd)	
Name of Adoptive F	ather	Middle	e Na	me of Adoptive Father		Give	n Name(s) of Adoptive Father	
						Home Phone	No.		
Date of Birth (yy/mm/dd)		Place of Birth		Beneficiary No.		Work Phone N	No.		
Address of Residence	_	City		Province/Territory	P	ostal Code		Years of Residence "Outside erritory" (if applicable)	
Community of Residence		nunity Affiliation		ocial Insurance No.	H	ealth Care Card	No.	"N" Number Health Canada (if Applicable)	
Marital Status Single Separated	Married Divorce		Law			Date	e of Ever	nt (yy/mm/dd)	



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Declaration of Inuit Customary Adoption Form

Section D DECLARATION	& SIGNATURES OF BIOLO	GICIAL & ADOPTIVE PARENTS					
(All blank fields must be completed)							
THAT the Child is born in	on the	day of the month of ,					
of the year .							
THAT the Biological Parents gave the Child	for adoption to the Adoptive	Parents on the day of the month					
of , of the year .							
THAT the adoption was made in accordance		ion procedures and the Child is recognized and					
known within the community of as the child of the Adoptive Parents, under the							
name THAT the Child is duly registered as a beneficiary pursuant to the James Bay and Northern Quebec Agreement, under							
, -	ficiary pursuant to the James	Bay and Northern Quebec Agreement, under					
number .							
_		Health Center to the biological mother has been sent					
	at the Child has been register	ed at birth at the Civil Status Registrar under the					
number .							
I, the Biological Mother, hereby declare that th							
this Declaration is accurate and true to the bes	t of my knowledge.	X					
Place of Signature	(yy/mm/dd)	Signature of Biological Mother					
I, the Biological Father, hereby declare that the							
Declaration is accurate and true to the best of		x					
Diana of Ciamatuma							
Place of Signature	(yy/mm/dd)	Signature of Biological Father					
I, the Adoptive Mother, hereby declare that the	e information contained in this						
	e information contained in this	Signature of Biological Father X					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of	e information contained in this my knowledge.	x					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature	e information contained in this my knowledge. (yy/mm/dd)						
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the	e information contained in this my knowledge. (yy/mm/dd) information contained in this	X Signature of Adoptive Mother					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature	e information contained in this my knowledge. (yy/mm/dd) information contained in this	x					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature	(yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd)	Signature of Adoptive Mother Signature of Adoptive Father					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM	X Signature of Adoptive Mother X					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Place of Signature Section E RESERVED TO TI I hereby declare that the information contained	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is	Signature of Adoptive Mother X Signature of Adoptive Father UNITY REPRESENTATIVES ONLY X					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY Signature of Mayor or Secretary Treasurer					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature	(yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is . (yy/mm/dd)	Signature of Adoptive Mother X Signature of Adoptive Father UNITY REPRESENTATIVES ONLY X					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature I hereby declare that the information contained	(yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is (yy/mm/dd) d in this Declaration is	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY Signature of Mayor or Secretary Treasurer Community Northern Village					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature	(yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM d in this Declaration is (yy/mm/dd) d in this Declaration is	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY Signature of Mayor or Secretary Treasurer Community Northern Village					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature I hereby declare that the information contained accurate and true to the best of my knowledge	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM do in this Declaration is . (yy/mm/dd) do in this Declaration is .	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY Signature of Mayor or Secretary Treasurer Community Northern Village Signature of President					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature I hereby declare that the information contained	(yy/mm/dd) d in this Declaration is (yy/mm/dd) d in this Declaration is (yy/mm/dd) d in this Declaration is (yy/mm/dd)	Signature of Adoptive Mother X Signature of Adoptive Father UNITY REPRESENTATIVES ONLY X Signature of Mayor or Secretary Treasurer Community Northern Village X Signature of President Community Landholding Corporation					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature	e information contained in this my knowledge. (yy/mm/dd) information contained in this my knowledge. (yy/mm/dd) HE NUNAVIK INUIT COMM do in this Declaration is . (yy/mm/dd) do in this Declaration is .	Signature of Adoptive Mother X Signature of Adoptive Father UNITY REPRESENTATIVES ONLY X Signature of Mayor or Secretary Treasurer Community Northern Village X Signature of President Community Landholding Corporation					
I, the Adoptive Mother, hereby declare that the Declaration is accurate and true to the best of Place of Signature I, the Adoptive Father, hereby declare that the Declaration is accurate and true to the best of Place of Signature Section E RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge Place of Signature RESERVED TO TI I hereby declare that the information contained accurate and true to the best of my knowledge	(yy/mm/dd) d in this Declaration is (yy/mm/dd) d in this Declaration is (yy/mm/dd) d in this Declaration is (yy/mm/dd)	Signature of Adoptive Mother Signature of Adoptive Father UNITY REPRESENTATIVES ONLY Signature of Mayor or Secretary Treasurer Community Northern Village Signature of President Community Landholding Corporation COPY TO: NUNAVIK ENROLMENT OFFICE					

(4) Community Landholding Corporation