

MÉTIS NATION OF ONTARIO REGISTRY

PERMISSION TO DISCUSS



I, _____
Last Name First Name

Give PERMISSION TO DISCUSS to the Métis Nation of Ontario (MNO). I understand that this release gives MNO Registry permission to verbally discuss all information about my file with the following people on an ongoing basis.

NAME OF INDIVIDUAL	RELATIONSHIP	CITIZENSHIP NUMBER (IF APPLICABLE)

My citizen number (if applicable): _____

Applicant's Signature:

Please keep signature within the box

Parent/Guardian Signature:

A parent/guardian must sign here only. Please leave the section above for the applicant, or leave blank.

Date: _____

(MM/DD/YYYY)