

Community Partners Membership # Date Received: For office use only

Change of Address, Phone or Email Address

## COMMUNITY PARTNERS MEMBERSHIP APPLICATION

## Steps to Complete this Application

1. Completely fill in each section.

Membership Info (check off)

New

- 2. Include proof of incorporation document and website address.
- 3. Sign and date the bottom of this application.
- 4. Applications and attachments can be emailed or mailed to:

Aboriginal Congress of Alberta Association Unit 201D, 11051 97 Street Edmonton, AB T5H 2N2

E: membership@aboriginalcongress.com

P: 780.699.9161

□ Card Replacement					Name Cha	ange					
Company/Organization Information											
Company/Organization Name											
Primary Contact for Company/Organization											
First Name			Last Name			Titl	е				
Company/Organization			City		Province		AB	P	ostal Code		
Address											
Email	Office Phone (Ext)					Website					
# of employees	mployees Incorporation Number/Trade Number										

Self-Identification (check off)						
Community Partner Membership						
non-profit	sole proprietor					
corporation	cooperative					

ur company and/or ocus its attention on		ies or areas of con	cern you would

	y comp	لللثة	, and, or org	arnea					
• We,, and/organization.	make	а	declaration	that	we	are	an	Indigenous-led	company

- We make the declaration that we have chosen to join ACAA as the recognized Provincial Affiliate of the Congress of Aboriginal Peoples (CAP), and recognize the work being done to champion all Indigenous Peoples in achieving our collective goals, objectives, and aspirations.
- We pledge to respect, assist, and honour my Sisters and Brothers in a common cause.

Oath of Indigenous Affiliation on behalf of my company and/or organization

- We pledge to follow the laws, policies and regulations established by the ACAA and the CAP, as amended from time to time by the Annual General Assembly of both ACAA and CAP.
- We pledge to actively participate, to the best of our capacity, in scheduled meetings and deliberations as requested. We will participate in this process in a respectful and honourable manner.
- We swear that all the information provided by me in this membership application is true and correct and we
  understand that it is an offence to make fraudulent and misrepresenting statements. We understand that this is
  a formal document of the Aboriginal Congress of Alberta Association and may be used in a court of law if
  required to defend and champion our collective rights.

Permission	
By signing below, I,, give membership number to be shared with the national office of purposes to ACAA funders.	permission for my company and/or organization name and the Congress of Aboriginal People (CAP) and for reporting
Applicant Signature	Date of Application