



## SECTION VI; DECLARATION FOR METIS HARVESTER IDENTIFICATION CARD

### Section to be completed for Metis Harvester Identification Card. (Manitoba residents only)

Name in Full (*current legal name, please print*):

\_\_\_\_\_  
Surname

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name(s)

\_\_\_\_\_  
Maiden (if applicable)

- I am a Metis resident of Manitoba and do hereby make application for the MMF Metis Harvester Identification Card.
- If I intend to harvest fish, big-game, small-game, game-bird (upland, migratory, wild turkey), firewood and other resources, I have demonstrable proof of sufficient knowledge of firearm, vehicular, and boating safety and operation, as applicable to the activity. I am solely responsible to ensure I have met all health and safety regulations and requirements, including possessing all applicable federal and provincial firearms, vehicular, and boating safety and operating certificates and licenses.
- I understand that my participation in the MMF Metis Harvesting Initiative, which includes the use of the Card, is an exercise of my Métis Rights. I accept, and agree to abide by, the MMF Constitution and Bylaws, and all MMF procedures and policies governing the use of the Card, including the MMF Metis Laws of the Harvest.
- I certify that the foregoing is true and accurate. I acknowledge and agree that if the information contained in this application form is subsequently determined to be false, the Card issued by MMF will be deemed invalid and will be revoked by MMF.
- I acknowledge and agree that the use of my Card does not guarantee me protection from seizures, charges, or prosecution pursuant to federal and provincial laws. I understand that in such event, MMF may provide me with legal assistance provided that I am charged for exercising my aboriginal harvesting rights, and that there is no allegation that I have contravened and safety, health, or other applicable conservation laws.
- I hereby release and discharge MMF, its officers and employees, of and from all manner of action, claims, demands, and damages whatsoever which I have or otherwise hereafter may have for or by reason of any injury, loss or damage arising from the issuance of a Card and/or the use of such Card by me.

\_\_\_\_\_  
Name of Applicant (please print)

\_\_\_\_\_  
Applicant Signature (in **BLACK INK**)

\_\_\_\_\_  
Date: mm/dd/yy

\_\_\_\_\_  
Name of Witness (please print) **OR**,  
If applicant is under 18 years old,  
Name of Parent/Guardian

\_\_\_\_\_  
Witness Signature **OR**, If applicant  
is under 18 years old, Parent/Guardian  
signature on behalf of applicant

\_\_\_\_\_  
Date: mm/dd/yy