



# ALLIANCE AUTOCHTONE DU QUÉBEC INC.

## Genealogy Research Form

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal code: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Date of marriage: \_\_\_\_\_

Place of marriage: \_\_\_\_\_

Name of spouse: \_\_\_\_\_

Spouse's date of birth: \_\_\_\_\_

Spouse's place of birth: \_\_\_\_\_

Name of children, their date of birth and place of birth: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**There is a cost of 195.00\$ for the genealogy research. Please make cheque or money-order payable to Diane Aubry.**



# ALLIANCE AUTOCHTONE DU QUÉBEC INC.

## Genealogy research form (Page 2)

You have to provide your birth certificate with your parents' names on it (long form).

Provide your parents' birth, marriage or death certificates with their parents' names on it.

Fill out the genealogy research questionnaire and make cheque or money-order in the amount of **195.00\$ payable to Diane Aubry.**

To request genealogy research, you must also apply to become a member of the Native Alliance of Quebec. Therefore, you must fill out the application form and make cheque payable to the Native Alliance of Quebec in the amount of **49.00\$ for your application.** Exception to the rule, for existing members who requests a second genealogy research, they don't need to fill out an application to become a member.

Return all documents with the payments to:

Native Alliance of Quebec  
21, Brodeur Street, Gatineau, QC  
J8Y 2P6

<b>Your Father</b>	<b>Your Mother</b>
Name :	Name :
Date of birth :	Date of birth :
Place of birth :	Place of birth :
Date of marriage :	
Place of marriage :	
Date of death :	Date of death :
Place of death :	Place of death :
<b>You paternal grandfather</b>	<b>Your paternal grandmother</b>
Name :	Name :
Date of birth :	Date of birth :
Place of birth :	Place of birth :
Date of marriage :	
Place of marriage :	
Date of death :	Date of death :
Place of death :	Place of death :

ALLIANCE AUTOCHTONE DU QUÉBEC INC.



## Genealogy research form (Page 3)

<b>Your maternal grandfather</b>	<b>Your maternal grandmother</b>
Name :	Name :
Date of birth :	Date of birth :
Place of birth :	Place of birth :
Date of marriage :	
Place of marriage :	
Date of death :	Date of death :
Place of death :	Place of death :

If you need more space, please write here:

[illegible]