



Assembly of First Nations (AFN)

National Caucus of Women Leaders (NCWL) Virtual Meeting

Virtual | March 8, 2025 | 10:00am-2:00pm ET

DELEGATE REGISTRATION FORM

PARTICIPANT TYPE :

- | | |
|-----------------------------------|------------------------------------|
| <input type="radio"/> Councillor | <input type="radio"/> Other |
| <input type="radio"/> Chief | <input type="radio"/> Tribal Chief |
| <input type="radio"/> Grand Chief | <input type="radio"/> Youth Chief |
| <input type="radio"/> Headperson | |

Contact Information *(please print):*

First Name: _____ Last Name: _____
Title: _____
First Nation/Organization/Company Name: _____
Street Address: _____ City/Town: _____
Province/Territory: _____ Postal Code: _____
E-mail Address: _____
Alternate Email Address: _____
Phone/Mobile Number () _____

Accessibility:

Do you require French translation to participate? Yes No
Do you require any other accommodation for virtual participation? Yes No

Consent to Videorecording:

I consent to the use of videorecording at this event.

Code of Conduct for AFN Event Participants:

I, AFN Event Participant, declare that I have read, understood and agree to comply with the AFN Code of Conduct and other applicable rules and policies adopted by the event participants, and I will:

1. Exercise the responsibilities and expected behaviours contained within this Code, at all times, with due diligence, care and skill in a reasonable and prudent manner;
2. Respect and support the AFN's rules, policies, including this Code and decisions of the meeting Chair(s) and/or CEO;
3. Conduct myself in a spirit of collegiality and respect for the other participants in attendance at the AFN Event.

I Agree