

DECLARATION OF COMMON-LAW RELATIONSHIP

MEMBER INFORMATION

Social Insurance Number: _____

Last Name: _____

First Name & Initial: _____

Birthdate (day/month/year): _____

Phone: _____

Mailing Address: _____

City/Town: _____

Province: _____

Postal Code: _____

SPOUSE'S INFORMATION

Last Name: _____

First Name & Initial: _____

Birthdate (day/month/year): _____

Phone: _____

Email: _____

DECLARATION

I, _____ of _____ in the
(Member's Name) (City/Town/Village)
province of, _____ country of _____
DO SOLEMNLY DECLARE, that I am not legally married and that _____
(Spouse's Name)
and I (have) cohabited in a conjugal relationship for _____ continuous year(s) from _____,
to _____, 20 _____.

There were children of the common-law union. Yes No
(This would include adopted children or children of one spouse to whom the other has acted as a parent)

Please provide the names of at least two disinterested parties who can confirm the common-law relationship for the time period stated.

Name	Address	Daytime Phone Number
_____	_____	_____
_____	_____	_____

Signature of Declarant

Declared before me in the city/town/village of _____ in the
province of, _____ this _____ day of _____, 20 _____.

Signature of Notary Public/Justice of the Peace/Commissioner for Oaths (please specify position)

Commissioner for Oaths in and for Saskatchewan whose appointment expires _____