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| THE WILL TO PROHIBIT PERSECUTION AND HARASSMENT OF ONE'S OWN INDIGENOUS, ETHNIC, AND TRIBAL HERITAGE. | | | |
| PERSONAL HERITAGE PROTECION ORDER - PROCESSING INSTITUTION DETAILS | | | |
| INSTITUTION | | | |
| DEPARTMENT | | | |
| STREET NAME | | | |
| BLOCK NUMBER | | SUITE NUMBER | |
| TOWN NAME | | POSTAL CODE | |
| COUNTY NAME | | TELEPHONE | |
| STATE NAME | | FACSIMILE | |
| COUNTRY NAME | | EMAIL | |
| PARENT / LEGAL GUARDIAN IDENTIFICATION DOCUMENT DETAILS | | PROTECTED JUVENILE IDENTIFICATION DOCUMENT DETAILS | |
| DOCUMENT TYPE | | DOCUMENT TYPE | |
| SERIAL NUMBER | | SERIAL NUMBER | |
| ISSUE DATE | | ISSUE DATE | |
| EXPIRE DATE | | EXPIRE DATE | |
| GOV. NUMBER | | GOV. NUMBER | |
| PARENT / LEGAL GUARDIAN IDENTIFICATION PERSONAL DETAILS | | PROTECTED JUVENILE IDENTIFICATION PERSONAL DETAILS | |
| FIRST NAME | | FIRST NAME | |
| MIDDLE NAME | | MIDDLE NAME | |
| LAST NAME | | LAST NAME | |
| BIRTH DATE | | BIRTH DATE | |
| BIRTH PLACE | | BIRTH PLACE | |
| BIRTH COUNTRY | | BIRTH COUNTRY | |
| CITIZENSHIP | | CITIZENSHIP | |
| GENDER | | GENDER | |
| PARENT / LEGAL GUARDIAN PERMANENT RESIDENCE DETAILS | | PROTECTED JUVENILE PERMANENT RESIDENCE DETAILS | |
| STREET NAME | | STREET NAME | |
| HOUSE NUMBER | | HOUSE NUMBER | |
| UNIT NUMBER | | UNIT NUMBER | |
| TOWN NAME | | TOWN NAME | |
| POSTAL CODE | | POSTAL CODE | |
| COUNTY NAME | | COUNTY NAME | |
| STATE NAME | | STATE NAME | |
| COUNTRY NAME | | COUNTRY NAME | |
| TELEPHONE | | TELEPHONE | |
| SMS MOBILE | | SMS MOBILE | |
| EMAIL | | EMAIL | |
| OTHER INFORMATION | | | |

I _____,
VOLUNTARILY DECLARE TO MY OWN INDIGENOUS, ETHNIC, TRIBAL HERITAGE INSTITUTION UNDER THE
NAME: _____,
IN THE TOWN OF: _____, ON THE DAY NUMBER: _____,
IN THE MONTH OF: _____, IN THE YEAR NUMBER: _____,
NOT BEING UNDER THE INFLUENCE OF SUBSTANCES THAT DISTURB MY CONSCIOUSNESS AND WILL TO
DECIDE, REFERRING TO THE PROTECTIONS OF ARTICLE II OF UN RESOLUTION A/RES/260/III FROM 09.12.1948
AND PROTECTIONS OF UN RESOLUTION A/RES/61/295 FROM 13.09.2007 I DECLARE THAT I WANT TO PROTECT
OWN PERSONAL NATURAL CLIMATIC INDIGENOUS ETHNIC TRIBAL HERITAGE OF THE PERSON WITH THE
FIRST NAME(S): _____,
AND LAST NAME(S): _____,
A MINOR UNDER MY LEGAL GUARDIANSHIP, THEREFORE, IN FULL KNOWLEDGE AND AWARENESS, I
WILLINGLY AND PURPOSEFULLY DECLARE AND EXPRESS MY WILL TO PREVENT AND PROHIBIT TOWARD THE
MENTIONED MINOR UNDER MY LEGAL GUARDIANSHIP:

**A. ALL PERSONS OF OPPOSITE BIOLOGICAL GENDER TOWARDS BIOLOGICAL GENDER OF A MINOR
UNDER MY LEGAL GUARDIANSHIP WHO ARE NON-INDIGENOUS, NON-ETHNIC, NON-TRIBAL TOWARDS
NATURAL INDIGENOUS ETHNIC TRIBAL HERITAGE OF A MINOR UNDER MY LEGAL GUARDIANSHIP
TO PREVENT ALL FORMS OF NON-INDIGENOUS, NON-ETHNIC, NON-TRIBAL INTIMACY, SEXUALITY,
PREGNANCY, BIRTH, MARRIAGE TOWARDS THE MINOR UNDER MY LEGAL GUARDIANSHIP.**

**B. IN ADDITION I WILLINGLY AND PURPOSEFULLY DECLARE MY WILL TO PREVENT AND PROHIBIT ALL
RELATIONSHIPS AND ASSOCIATIONS INDICATED BELOW THAT ARE NON-INDIGENOUS, NON-ETHNIC,
NON-TRIBAL TOWARDS THE VISIBLE BODY CHARACTERISTICS OF MINOR UNDER MY LEGAL
GUARDIANSHIP WHICH I DEFINE IN POINTS "C" AND "D" THAT BELONG TO OWN NATURAL INDIGENOUS
ETHNIC TRIBAL HERITAGE OF MINOR UNDER MY LEGAL GUARDIANSHIP:**

- ☐ **1. CULTURAL, SPIRITUAL, RELIGIOUS WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.
- ☐ **2. PUBLIC, SOCIAL, COMMUNAL WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.
- ☐ **3. SCHOOL, EDUCATIONAL, RESEARCH WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.
- ☐ **4. SPORT, RECREATION, VACATION WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.
- ☐ **5. ECONOMIC, PROFESSIONAL, EMPLOYMENT WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.
- ☐ **6. OTHER: _____**
_____ **WITH OPPOSITE BIOLOGICAL GENDER.**
☐ b. SAME BIOLOGICAL GENDER.

I DECLARE THAT I DO NOT CONSENT TO ANY PERSON OUTSIDE BIOLOGICAL FAMILY OF A MINOR
UNDER MY LEGAL GUARDIANSHIP WHO DO NOT HAVE THE VISIBLE NATURAL INDIGENOUS, ETHNIC, TRIBAL
BODY CHARACTERISTICS INDICATED IN POINTS "C" AND "D" WERE IN ANY WAY AUTHORIZED AND ENTITLED
TO PHYSICAL AND NON-PHYSICAL CONTACT WITH THE INDICATED MINOR UNDER MY LEGAL GUARDIANSHIP
FOR NON-INDIGENOUS, NON-ETHNIC, NON-TRIBAL PURPOSES INDICATED IN POINTS "A" AND "B", WHICH
TYPES OF PHYSICAL AND NON-PHYSICAL CONTACT I DECLARE AND RESERVE ONLY FOR PERSONS OF MINOR
UNDER MY LEGAL GUARDIANSHIP OWN NATURAL INDIGENOUS, ETHNIC, TRIBAL HERITAGE AS INDICATED IN
POINTS "C" AND "D" THAT CONSTITUTE MINOR'S UNDER LEGAL GUARDIANSHIP VISIBLY IDENTICAL OR
SIMILAR NATURAL INDIGENOUS, ETHNIC, TRIBAL HERITAGE AND BELONGING.

C. I RESERVE AND PERMIT ALL RELATHIONSHIPS AND CONNECTIONS INDICATED IN POINT(S) “A” AND “B” ONLY FOR PERSONS WITH ALL THE SAME VISIBLY IDENTICAL INDEGENOUS ETHNIC, TRIBAL BODY CHARACTERISTICS TO BODY CHARACTERISTS OF MINOR UNDER MY LEGAL GUARDIANSHIP INDICATED BELOW IN ACCORDANCE WITH AND RECOMMENDED BY MY INDIGENOUS, ETHNIC, TRIBAL HERITAGE INSTITUTION’S GUIDELINES:

- ☐ **1. NATURALLY PRESENT ON BODY SKIN OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS ETHNIC TRIBAL HAIR(S) TYPE(S) AND COLOR(S):**

| | | | | |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|
| HAIR(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TYPE(S) (A-D) | A | B | C | D |
| COLOR(S) (0-7) | | | | |

- ☐ **2. NATURALLY PRESENT ON BODY SKIN OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS ETHNIC TRIBAL SKIN(S) PHOTOTYPE(S):**

| | | | | | | | |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| SKIN(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TYPE(S) (0-VI) | 0 | I | II | III | IV | V | VI |

- ☐ **3. NATURALLY PRESENT IN THE EYE(S) OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS, ETHNIC, TRIBAL COLOR(S) OF THE ORBITAL AND RADIAL ELEMENTS OF THE EYE(S) ORIS-IRIS:**

| | | | | | |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ARCTIC EYE(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | WHITE | GRAY | BLUE | PURPLE | GREEN |
| LIGTH / MEDIUM / DARK | | | | | |
| AQUATIC EYE(S) RAFALTIC EYE(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | BLACK | BROWN | RED | ORANGE | YELLOW |
| LIGTH / MEDIUM / DARK | | | | | |

D. I RESERVE AND PERMIT ALL RELATHIONSHIPS AND CONNECTIONS INDICATED IN POINT(S) “A” AND “B” ONLY FOR PERSONS WITH PARTIALLY THE SAME VISIBLY SIMILAR INDIGENOUS, ETHNIC, TRIBAL BODY CHARACTERISTICS TO BODY CHARACTERISTIC OF MINOR UNDER MY LEGAL GUARDIANSHIP IN ACCORDANCE WITH AND RECOMMENDED BY MY INDIGENOUS, ETHNIC, TRIBAL HERITAGE INSTITUTION’S GUIDELINES INDICATED BELOW:

- ☐ **1. NATURALLY PRESENT ON BODY SKIN OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS ETHNIC TRIBAL HAIR(S) TYPE(S) AND COLOR(S):**

| | | | | |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|
| HAIR(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TYPE(S) (A-D) | A | B | C | D |
| COLOR(S) (0-7) | | | | |

- ☐ **2. NATURALLY PRESENT ON BODY SKIN OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS ETHNIC TRIBAL SKIN(S) PHOTOTYPE(S):**

| | | | | | | | |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| SKIN(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TYPE(S) (0-VI) | 0 | I | II | III | IV | V | VI |

- ☐ **3. NATURALLY PRESENT IN THE EYE(S) OF MINOR UNDER MY LEGAL GUARDIANSHIP INDIGENOUS, ETHNIC, TRIBAL COLOR(S) OF THE ORBITAL AND RADIAL ELEMENTS OF THE EYE(S) ORIS-IRIS:**

| | | | | | |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ARCTIC EYE(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | WHITE | GRAY | BLUE | PURPLE | GREEN |
| LIGTH / MEDIUM / DARK | | | | | |
| AQUATIC EYE(S) RAFALTIC EYE(S) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | BLACK | BROWN | RED | ORANGE | YELLOW |
| LIGTH / MEDIUM / DARK | | | | | |

I DECLARE THAT ALL TYPES OF NON-INDIGENOUS, NON-ETHNIC, NON-TRIBAL CONTACTS INDICATED IN POINTS "A" AND "B" WITH ALL PERSONS WHO DO NOT POSSESS VISIBLE NATURAL, INDIGENOUS, ETHNIC, TRIBAL BODY CHARACTERISTICS OF MINOR UNDER MY LEGAL GUARDIANSHIP INDICATED IN POINTS "C" AND "D" DISCONNECTS AWARENESS OF MINOR UNDER MY LEGAL GUARDIANSHIP OWN, NATURAL, INDIGENOUS, ETHNIC, TRIBAL HERITAGE, WHICH INEFFECT LEADS THE MINOR TO THE CONNECTIONS AND RELATIONSHIPS INDICATED IN POINTS "A" AND "B".

INDICATED IN POINTS “A” AND “B” CONNECTIONS AND RELATIONSHIPS DESTROY MINOR’S UNDER MY LEGAL GUARDIANSHIP NATURAL INDIGENOUS, ETHNIC, TRIBAL HERITAGE, HEALTH, INTIMACY, SEXUALITY, PARENTHOOD, FAMILY, LIFE'S WHAT WHICH LEADS TO PERMANENT DAMAGE TO MINOR UNDER MY LEGAL GUARDIANSHIP OWN NATURAL INDIGENOUS, ETHNIC, HEREDITARY, PHYSICAL, MENTAL, LINGUISTIC, RELIGIOUS HERITAGE, ACQUIRED IN CONNECTION WITH THE UNIQUE LONG-TERM EXISTENCE IN THE SPECIFIC NATURAL CLIMATIC ZONE OF MINOR’S UNDER MY LEGAL GUARDIANSHIP NATURAL INDIGENOUS, ETHNIC, TRIBAL GROUP SPECIFIED IN POINTS “C” AND “D”, THAT USES THE FOLLOWING NAME:

MY GROUP NAME: _____.

FOR THE GOOD OF MINOR’S UNDER MY LEGAL GUARDIANSHIP OWN NATURAL, INDIGENOUS, ETHNIC, TRIBAL DESCENDANTS AND THE REST OF MINOR’S UNDER MY LEGAL GUARDIANSHIP OWN NATURAL, INDIGENOUS, ETHNIC TRIBE AND THEIR HERITAGE, THEREBY PREVENTING GENOCIDE OF MINOR’S UNDER MY LEGAL GUARDIANSHIP OWN NATURAL, INDIGENOUS, ETHNIC, TRIBAL GROUP, BASED ON UN RESOLUTION NO. A/RES/61/295 OF 13.09.2007 AND UN RESOLUTION NO. A/RES/260/III OF 09.12.1948. I REQUEST THE DESIGNATED INSTITUTION TO ACCEPT THE ABOVE DECLARATION OF MY WILL AND ISSUE THE DOCUMENT OF INDIGENOUS, ETHNIC, TRIBAL PROTECTION WHICH INDICATES:

- 1. THE TYPES NON-INDIGENOUS, NON-ETHNIC, NON-TRIBAL RELATIONSHIPS AND ASSOCIATIONS INDICATED IN POINTS “A” AND “B” PROHIBITED AND RESTRICTED.
- 2. THE TYPES OF OWN INDIGENOUS, ETHNIC, TRIBAL BODY CHARACTERISTIC’S INDICATED IN POINTS “C” AND “D” RESERVED AND PERMISSIBLE FOR ALL RELATIONSHIPS AND ASSOCIATIONS.
- 3. RIGHTS PROTECTING INDIGENOUS, ETHNIC, AND TRIBAL GROUPS IN PARTICULAR: UN A/RES/47/135, UN A/RES/54/4, UN/A/RES/61/295, UN/A/RES/260/III, UN A/RES/317/IV, UN ILO/C/169/1989, POL LEX 06/01/2005, UNDER WHICH AN ACT PROHIBITED AGAINST THESE PROTECTED PERSONS AND GROUPS CONSTITUTES A CRIME FORBIDDEN BY THE LAW.

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| SIGNATURE OF APPLICANT, DATE OF APPLICATION SUBMISSION. | STAMP OF INDIGENOUS INSTITUTION, DATE OF APPLICATION ACCEPTANCE. |