



# Little Traverse Bay Bands of Odawa Indians

Enrollment Office  
7500 Odawa Circle  
Harbor Springs MI 49740

(231) 242-1520 \* (231) 242-1521 \* (231) 242-1522



## Canadian Indian Bands Relinquishment

*This form is used for registered Indians in Canada that are unable to relinquish membership in the Canadian Indian Bands. The LTBB Enrollment office will accept this form as proof of relinquishment for applicants applying for enrollment with Little Traverse Bay Bands of Odawa Indians.*

I \_\_\_\_\_ Date of Birth \_\_\_\_\_ hereby

relinquish my membership with: \_\_\_\_\_

(Canadian Indian Bands Name and Phone Number)

\_\_\_\_\_

(Bands address)

For the following reasons: \_\_\_\_\_.

This cancellation of my membership is made freely and voluntarily.

Recognizing that some Canadian tribes refuse to remove a member or Citizen from their roll even though that member or Citizen tries to be removed by filing a relinquishment, the LTBB applicant or Citizen has made every possible effort to be removed from the other tribe's roll. (WOS# 2022-006, Section IX. Dual Membership or Citizenship Prohibition)

*A copy of this form must be included with the LTBB Enrollment application. The LTBB Enrollment staff will verify enrollment with the Canadian Indian Band to verify Enrollment and relinquishment.*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

### Notary Public

I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_ County of \_\_\_\_\_ do hereby certify that \_\_\_\_\_ provided proper identification that clearly

(Name of person being acknowledged)

identifies the person who executed the foregoing instrument as the above named individual. Subscribed and sworn to me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Stamp

Seal

\_\_\_\_\_  
Notary Public Signature

My Commission Expires on \_\_\_\_\_