Conditional Relinquishment
Acknowledgement Letter
Do Not Fax This Form

1. A Conditional Relinquishment is when a tribal citizen wants to relinquish his/her Tribal Citizenship with Little Traverse Bay Bands of Odawa Indians upon acceptance as a member of another federally recognized Tribe.

2. A LTBB citizen who is relinquishing their citizenship in the Little Traverse Bay Bands of Odawa Indians and seeking membership in another federally recognized tribe may conditionally relinquish their citizenship.

3. A conditional relinquishment shall operate to delay a LTBB Citizens relinquishment from becoming effective until the citizen becomes enrolled in another federally recognized tribe.

4. All Conditional Relinquishments must be on a form generated by the LTBB Enrollment Department and the form must be notarized.

5. It is the responsibility of the LTBB Citizen to contact LTBB Enrollment Department by the Anticipated Enrollment Date listed on the Conditional Relinquishment Form or as soon as the LTBB citizen becomes a member of the Tribe in which they are applying for.

6. The Anticipated Enrollment Date listed on the Conditional Relinquishment is the date the Conditional Relinquishment form will expire unless the LTBB Tribal Citizen becomes enrolled.

7. The Conditional Relinquishment Acknowledgement Letter and Conditional Relinquishment Form must be submitted together to become valid, both forms must be original.

I have read the Conditional Relinquishment requirements and by signing this I agree to contact the Little Traverse Bay Bands of Odawa Indians by the anticipated date of enrollment or if I become enrolled with the Tribe I am applying for. I understand that once I become enrolled with the Tribe I am applying for the LTBB Regulations for procedures of Relinquishment VII A. will apply.

__________________________  ______________________
Name                               Date

This must be included with the conditional relinquishment
Little Traverse Bay Bands of Odawa Indians
Enrollment Office
7500 Odawa Circle
Harbor Springs, MI 49740
(231) 242-1520 ■ (231) 242-1521

CONDITIONAL RELINQUISHMENT
Do Not Fax This Form

I, _____________________________, LTBB Number: _____________________________ DOB: _____________________________ would like to file a Conditional Relinquishment with the Little Traverse Bay Bands of Odawa Indians. The purpose of completing a conditional relinquishment is to delay a LTBB Citizens relinquishment from becoming effective until the LTBB citizen becomes enrolled in another federally recognized Tribe.

I am applying for membership ___  Or ___ I will be applying for membership ___

Name of Federally Recognized

Address, City, State __________ __________ Zip Code

Phone Number and area code

Enrollment Officer/Clerk/Coordinator & Other Phone

*My Anticipated Date of Enrollment with the Tribe I am applying for is: ___________________________.

I am completing this conditional relinquishment freely and voluntarily with full understanding that I Agree to contact the Little Traverse Bay Bands of Odawa Indians by the anticipated date listed above or if I become a member prior to the anticipated date above.

Name _____________________________ Date ___________________________

NOTARY PUBLIC

I, _____________________________, a Notary Public for the State of _____________________________, County of _____________________________, Do hereby certify that _____________________________ has provided proper identification that clearly identified the person who executed the foregoing instrument as the above name individual. Subscribed and sworn to me this _____ day of _____________, 20___

Stamp & Seal _____________________________ Notary Public Signature _____________________________

My Commission Expires on _____________________________

_____________________________ _____________________________
LTBB Enrollment Staff: White Copy: LTBB Enrollment Dept Yellow Copy: Forward to Tribe LTBB Citizen is applying for.

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