

Relinquishment of Tribal Membership Request Instructions

GENERAL:

- By submitting this form, you are requesting that your Tribal Membership with the Oneida Nation of Wisconsin be relinquished.
- The request will be reviewed by the Trust Enrollment Committee and then go to the Business Committee for final approval.
- Upon approval, you will no longer be eligible for services/benefits of Tribal Members, which may include but not limited to: Per Capita Payments, Housing, and/or Higher Education Funding.

REQUEST REQUIREMENTS:

- Relinquishment of Tribal Membership Request*
 - Complete Section 1
 - Sign & Date Section 2 in the presence of a Notary Public
- Fee*
 - Submit payment of \$10.00
 - Please do not mail cash
 - Make check or money order payable to: Oneida Trust Enrollment Department
 - Fee is non-refundable
- Submit the above items to the Oneida Trust Enrollment Department*



Relinquishment of Oneida Nation Membership Request

SECTION 1: MEMBER INFORMATION

Roll Number: _____ Birth Date: _____ Social Security Number: _____

First Name: _____ MI: _____ Last Name: _____

Address: _____
STREET OR PO BOX APT CITY STATE ZIP

Reason for Relinquishment: _____

SECTION 2: MEMBER SIGNATURE AND NOTARIZATION

I, the undersigned, hereby request Relinquishment from the Oneida Nation. This cancellation of membership is made with the full understanding that henceforth I shall cease to hold any RIGHTS, TITLE AND INTEREST to TRIBAL ASSETS of said Tribe. I further request that my name be removed from the Tribal MEMBERSHIP and any other Tribal Roll of said Tribe.

Signature: _____ Date: _____

CERTIFICATE OF NOTARY PUBLIC OR ONEIDA ENROLLMENT OFFICIAL

(SEAL/STAMP)

Subscribed and sworn to before me this _____ day

of _____,

Notary Signature: _____

My Commission Expires: _____

SECTION 3: APPROVAL

OFFICE USE ONLY
Attach copies of minutes with approval/disapproval. File.