**Child Relinquishment Form**

To the Organized Village of Kasaan Enrollment:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, an adult person as the legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby authorize the relinquishment of their tribal membership.

This relinquishment of their tribal membership is made freely and voluntarily with the full understanding that henceforth, they shall cease to hold membership in the Organized Village of Kasaan.

I understand, they will no longer be eligible for benefits entitled to as a member of this tribe. Their membership will be relinquished and approved at the next regular meeting of the Organized Village of Kasaan.

Signature of Person relinquishing:

Date:

Applicant’s Address:

Subscribed and sworn to me before a notary public, this \_\_\_\_\_ day of: \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_: By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Individual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

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