

The Saginaw Chippewa Indian Tribe of Michigan

Address Change for Tribal Children Members

Tribal Clerk's Office, 7070 East Broadway, Mt. Pleasant, Michigan 48858, Phone: 989.775.4054, Fax: 989.775.4094

PARENT OR GUARDIAN: *PLEASE PRINT INFORMATION CLEARLY AND SIGN IN FRONT OF A NOTARY BEFORE MAILING* Fill out the information below in full. DO NOT fill out this form for anyone 18 years of age or older.

As the parent or guardian of the following child(ren) I, _____,

attest that the following child(ren) reside with me at:

Number/Street	Apartment/Lot	City	State	Zip
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The child(ren)'s mailing address is:

Number/Street	Apartment/Lot	City	State	Zip
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PHONE(S): () - () -

Print the names of the Tribal Member Children residing at the above address:

Child's Full Name	/ /	M
	Birthdate	SCIT Membership #

Child's Full Name	/ /	M
	Birthdate	SCIT Membership #

Child's Full Name	/ /	M
	Birthdate	SCIT Membership #

Child's Full Name	/ /	M
	Birthdate	SCIT Membership #

Child's Full Name	/ /	M
	Birthdate	SCIT Membership #

By signing below as the parent or guardian, I attest that the above named child/children reside(s) at the address listed above.

Signature of Parent or Guardian

Date

STATE OF)
)ss.

COUNTY OF)

This instrument was acknowledged before me on this _____ day of _____, _____; sworn and subscribed before me by _____.

Notary Public Signature

In and for the State of _____

County of _____

My Commission Expires on _____

Acting in _____ County