



The Saginaw Chippewa Indian Tribe Of Michigan

7500 SOARING EAGLE BLVD.

MT. PLEASANT, MICHIGAN 48858

(989) 775-4054

TRIBAL CLERK'S OFFICE

FAX (989) 775-4094

THE SAGINAW CHIPPEWA INDIAN TRIBE OF MICHIGAN TRIBAL CLERKS OFFICE

Membership Number: M _____ Date: _____

Name as it currently appears on the Tribal Roll:

Name Change:

Do you wish to re-register to vote: Yes No

Please sign your new name below with a felt-tip pen (Sharpie).

LEGAL NAME CHANGE - REQUIRED DOCUMENTS Social Security Card with New Name, Amended Birth Certificate w/new name and one or more of the following supportive documents:

- Legal Name Change Order Adoption Record/Court Order
 Other _____

OTHER NAME CHANGE - REQUIRED DOCUMENTS Social Security with New Name and one or more of the following supportive documents:

- Divorce Papers Marriage License:

FOR OFFICE USE ONLY

Teams Updated: _____ Date _____ File Updated: _____ Date _____
Initials Initials

Copy to: Enrollment, Per Cap, and Benefits (Lisa/Craig), Business Regulations (Chris), Accounts Payable (Jeni G/Carol K).