

**REQUEST TO RELINQUISH MEMBERSHIP IN THE
YUROK TRIBE**

Name: _____

Date of Birth _____ **Yurok Roll #562-** _____

I, _____ do hereby voluntarily relinquish my membership in the Yurok Tribe. I understand that I will no longer be eligible to exercise any tribal rights to which I was entitled while I was a member of the Yurok Tribe. I further understand that by relinquishing my membership, my descendants may not be eligible for membership in the Yurok Tribe, in accordance with Section 5.2.c of the Enrollment Ordinance of the Yurok Tribe.

Date Signature
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A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF \_\_\_\_\_)

COUNTY \_\_\_\_\_)

On \_\_\_\_\_, 20 \_\_\_\_, before me, \_\_\_\_\_ a notary public personally appeared \_\_\_\_\_ who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged to me that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature(s) on the instrument the person(s), executed the instrument.

I certify under PENALTY OF PERJURY that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public