



Relinquishment Application

Osage Nation
Membership Office
239 E. 12th St.
P.O. Box 488
Pawhuska, OK 74056
1-800-818-6517
918-287-5389

I, _____, born on _____ do hereby request that my Membership # _____ in the Osage Nation be terminated due to the following reasons:

_____.

I fully understand that once my membership is relinquished from the Osage Nation, I am eligible to reapply for Membership with the Osage Nation again ONE TIME only.

Dated this _____ day of _____, 20____

Signature _____

Sworn to before me this _____ day of _____, 20____

Notary Public _____ # _____

Commission expires _____

PLEASE RETURN YOUR OLD MEMBERSHIP CARD OR A NOTARIZED STATEMENT IF YOU HAVE LOST YOUR CARD.

For office use only

Date Relinquished

Initials of Clerk

Received