



**Mackinac Bands of Chippewa and Ottawa Indians
P O Box 250
St Ignace, MI 49781**



APPLICATION FOR ENROLLMENT

The criteria for the Mackinac Bands enrollment shall include documented lineal descent and heritage to one of the seven historical bands who the United States Government recognizes as the Mackinac Bands. Bands eleven thru seventeen. No specific “blood quantum”, but some Mackinac Bands ancestors (Blood) or adoption.

The following documents are required for each applicant – including Minor Children:

Application for Enrollment Form / Fees:

Complete and sign form for each individual applying for enrollment in the Mackinac Bands. Minor children (under the age of 18) included on the Parent/Guardians application must have a Birth Certificate included.

Each applicant over the age of 18 years of age must include a non-refundable fee of \$60.00. A non-refundable processing fee of \$25.00 is required for each minor child

Cashier Check or Money orders payable to: Mackinac Bands of Chippewa & Ottawa Indians Inc. and send to: P.O. Box 250 St. Ignace, MI 49781.

Personal checks are not accepted

Identification:

Applicant or Guardian of a minor child must submit a copy of one piece of Official Documentation. Accepted Official Documentation includes:

Birth Certificate

Minor Children – include Birth Certificate or a Court Order showing you have legal authority to enroll the minor child.

A photo copy of your Birth Certificate or Baptismal Certificate issued and signed by a County or church Official. Must show your name and your parents’ names.

If you are a married female, you must include a copy of your Marriage License.



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You must provide supporting documents that link you to the person in which you are connecting yourself to the person on the Horace B. Durant, or Census rolls, Mackinac Bands 11-17. Examples:

- A County Birth Certificate for the person that is applying, or Baptismal Certificate that shows the applicants parents
- A County Marriage License
- A County Death Certificate

This will need to show the lineage from the applicant to the person on the above rolls

Do not send original documents

Documents **will not be returned** to the applicant and Mackinac Bands will **not** be responsible for lost or misplaced items. We will not copy files for enrollees, please use the final checklist of what you need to send in with your application.

I request enrollment into the Mackinac Bands of Chippewa & Ottawa Indians

Signature of Applicant

Date:



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Line of Decedents

Parent: _____

Grandparent: _____

Great Grandparent: _____

Great Great Grandparent: _____

Great Great Great Grandparent: _____

Name of Ancestor listed on the Roll: _____

Name of particular census, annuity, or Durant Roll: _____

Number assigned to family member: _____

Are you a Member of any other Tribe? _____

Do you have a family member who is enrolled? _____

List of Children under 18 who live in the Household

Name	Birth Date	Sex	Office use only

Certified Birth or Baptismal Certificate must be Submitted

For Office Use Only:

Enrollment Director

Date

Approved

Denied



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Informational Page:

Please provide the following information:

Name: _____

Address: _____

Date of Birth: _____

Email Address: _____

Primary Contact Number: _____

Secondary Contact Number: _____

Documents submitted: _____

Are you related to any member of Mackinac Band? _____

If so please give the name of the person: _____

Durant or Census number assigned to family member: _____

Are you a member of any federally recognized Tribe: _____

Are you a member of any other organization of Mackinac Band? _____



MACKINAC BANDS OF CHIPPEWA OTTAWA INDIANS

P.O. Box 250 St. Ignace, Mi. 49781

enrollment@mackinacband.com

906-984-2202

Please complete the entire form to the best of your ability (including non-native descendants) you can only belong to one Tribe.



ROLL NO.

Name	
Address	
City State Zip	
Telephone	

Key to Abbreviations

BD	Birth Date
POB	Place of Birth
DOM	Date of Marriage
Plc Married	Place Married
DOD	Date of Death
POD	Place of Death

FATHER 4

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

FATHER 8

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

FATHER 2

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

MOTHER 9

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

MOTHER 5

Name	
BD	
POB	
DOD	
POD	

FATHER 10

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

1

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Person Number 1 or the same person as Number _____ on Chart Number _____

MOTHER 11

Name	
BD	
POB	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOD	
POD	

FATHER 6

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

FATHER 12

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

MOTHER 3

Name	
BD	
POB	
DOD	
POD	

MOTHER 13

Name	
BD	
POB	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOD	
POD	

MOTHER 7

Name	
BD	
POB	
DOD	
POD	

FATHER 14

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOM	
Plc Married	
DOD	
POD	

HOW TO USE THIS FORM: Begin by entering the information about yourself at No. 1, your father at No. 2, his father at No. 4, and so on. If you need to trace your ancestry farther back than this form allows, simply enter the name of your relative which appears in the column numbered 8 through 15 in blank No. 1 on another chart and continue. Documentary evidence must be furnished. If you are filling out this form for another person, then enter their information at No. 1.

MOTHER 15

Name	
BD	
POB	
DOD	
POD	

Cont. Chart

Name	
BD	
POB	
DOD	
POD	