



Aroostook Band of Micmacs  
7 Northern Rd  
Presque Isle ME 04769

Dear Applicant:

To apply for membership with the Aroostook Band of Micmacs the first thing you must do is register with this office. To do so, complete and return the attached membership application. **You must have the enclosed Certification notarized.** Please fill out this form as completely as possible and include the following required documentation:

**A certified birth certificate with seal**  
**Photocopy of a picture I.D. (i.e. Indian status card or drivers license)**  
**Actual documentation of Micmac Ancestry**  
**Pre-recognition (November 26, 1991) ties to Aroostook County**

**Should you not provide the required documentation your application for membership will not be considered.**

The Aroostook Band of Micmacs does not have a genealogist on staff to research ancestry, therefore, the Tribe will not provide any genealogical research. The burden of proof is the responsibility of the applicant.

Once you have submitted the application with the required documentation the Aroostook Band of Micmacs Membership Committee will then review the information and make recommendations to the Tribal Council, who will make the final decision on the application.

Sincerely

Julia Miller  
Tribal Clerk

## MEMBERSHIP CHECKLIST

The following items are required to apply for membership. This checklist is for your use to ensure that you have included all required documentation along with your application.

- \_\_\_\_\_ **Application**
- \_\_\_\_\_ **Affidavit notarized**
- \_\_\_\_\_ **Birth Certificate (certified copy)**
- \_\_\_\_\_ **Actual documentation of Micmac ancestry**
- \_\_\_\_\_ **Proof of family ties to Aroostook County**
- \_\_\_\_\_ **Proof of U.S. citizenship**
- \_\_\_\_\_ **Photocopy of a picture I.D. (i.e. Indian status card/drivers license)**

**MEMBERSHIP INFORMATION**

1. Applicants Name: \_\_\_\_\_

2. Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Phone Number: \_\_\_\_\_

4. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

5. Place of Birth \_\_\_\_\_

6. Male / Female      M      \_\_\_\_\_      F      \_\_\_\_\_

7. Citizenship      U.S.A. \_\_\_\_\_      Canada      \_\_\_\_\_

8. Children's Information

    Name: \_\_\_\_\_  
    Date of Birth: \_\_\_\_\_  
    Place of Birth: \_\_\_\_\_

    Name: \_\_\_\_\_  
    Date of Birth: \_\_\_\_\_  
    Place of Birth: \_\_\_\_\_

    Name: \_\_\_\_\_  
    Date of Birth: \_\_\_\_\_  
    Place of Birth: \_\_\_\_\_

I and my child(ren) reside at \_\_\_\_\_, in the Town/City of \_\_\_\_\_, in the State or Province of \_\_\_\_\_

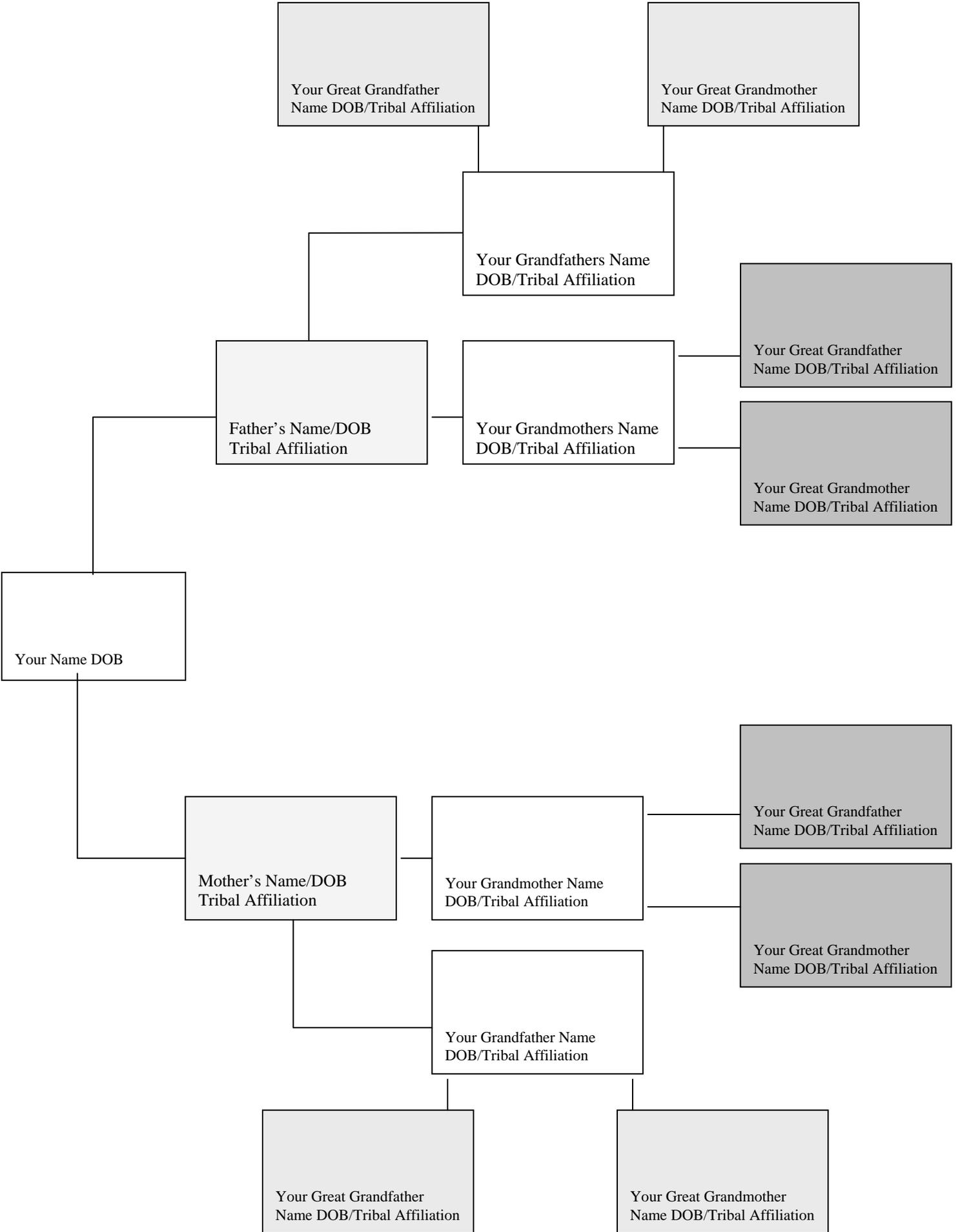
or have established significant ties to Aroostook County as evidenced by \_\_\_\_\_

I and my child(ren) are United States citizens. YES \_\_\_\_\_ NO \_\_\_\_\_

I consider myself and my child(ren) to be Micmac. YES \_\_\_\_\_ NO \_\_\_\_\_

I or my child(ren) are not enrolled with another federally recognized tribe within the United States. YES \_\_\_\_\_ NO \_\_\_\_\_





**CERTIFICATION**

I, \_\_\_\_\_, applicant for membership with the Aroostook Band of Micmacs do hereby swear and affirm that the information provided within the application and documents in support of my application are true and accurate. I acknowledge that this affirmation is made under penalty of perjury and if this information is found to have been fraudulently submitted I will be subject to removal from the Aroostook Band of Micmacs tribal roll and to recovery of the value of all benefits, I have received.

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**  
**Printed Name:\_\_\_\_\_**

STATE OF \_\_\_\_\_  
\_\_\_\_\_, SS.

Personally appeared before me the above named \_\_\_\_\_, and made oath that the foregoing statements by him/her are true.

\_\_\_\_\_  
**NOTARY PUBLIC/ATTORNEY AT LAW**  
Commission expires:

\_\_\_\_\_  
**DATE**