Peoria Tribe of Indians of Oklahoma 118 S Eight Tribes Trail (918) 540-2535 PO Box 1527 Miami OK 74355

Instructions for Photo Membership Card Application

- 1. Complete the Membership Card application form in its entirety in **BLACK INK**.
- 2. Attach two (2) 2"x2" passport photos please do not use staples. The photos must be able to be removed as they are going to be scanned. You do not need to obtain a passport. If you have a passport, DO NOT make a copy of those photos. Go to an establishment that takes passport photos (ex: Walgreens, Kinkos, Wal-Mart, etc.) have the photos taken and return those two photos with the application.
- 3. In front of notary sign your name inside the box and date the application. Attached notarizations will **NOT** be accepted and will be returned to the submitter.
- 4. Have notary notarize photo membership card application.
- 5. Fold notarized application (<u>be careful not to fold the pictures</u>) and place inside an envelope and return to the Enrollment Office.

Applications not completed, as per the instruction sheet, will not be processed and will be returned with a request for application process to be repeated.

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TRIBAL MEMBERSHIP CARD APPLICATION

	Date:		
Tribal Member:(First Name)	(
(First Name)	(Middle Name)	(Maiden Name)	(Last Name)
Address:			
	(City)	(State)	(Zip)
(Hama Diagra)	(D + CD' 1)		
(Home Phone)	(Date of Birth)	()	Social Security Number)
(Email)			
I am requesting a duplicate membership	card for the following reason	n(s):	
CT 1 1M			
Signature of Tribal Member:		Date:	
		-	
		A notany public or other	officer completing this certificate
		verifies only the identity	of the individual who signed the
		truthfulness, accuracy, o	certificate is attached, and not the rvalidity of that document
Attach passport p	hotos here		
<u>Please</u> do not use glue or paperclips.		County of_	20
Attach photos h		On	20
Please place on back of	of photos only.	before me	(insert name and title of officer)
Photos must be able to be remo	ved easily for scanning	personally appeared:	
		who may add a man and the	(please print name)
		be the person(s) whose i	e basis of satisfactory evidence to name(s) is/are subscribed to the
		within instrument and a	cknowledged to me that he/she/they
			s/her/their authorized capacity(ies), signature(s) on the instrument the
		person(s), or the entity t	ipon behalf of which the person(s)
	*	acted, executed the instr I certify under PENALT	ument. Y OF PERJURY under the laws of
		the State of	that the
		foregoing paragraph is t Witness my hand and of	
(Seal)			
	Nota	ry Signature:	
	My (Commission expires:	<u></u>
3			
	For Office Use Only	y:	
Application Taken By:		Date:	
		DOB:	
Roll Number:		Date Issued:	
Apr	proved By:		