



# PEORIA TRIBE

OF INDIANS OF OKLAHOMA

118 S. Eight Tribes Trail • P.O. Box 1527

Miami, Oklahoma 74355

(918) 540-2535

## MEMBERSHIP APPLICATION INSTRUCTION SHEET

*Membership with the Peoria Tribe of Indians of Oklahoma is established by the Constitution of the Peoria Tribe of Indians of Oklahoma, Article III approved August 13, 1997*

**Section 1. Membership with the Peoria Tribe of Indians of Oklahoma shall consist of the following persons:**

- (a) All Persons of Indian blood whose names appear on the official census roll of the Tribe dated January 1, 1937, and/or on the official membership roll of the Tribe as of August 3, 1956.
- (b) Any person of Peoria Indian blood who is a descendant from a person whose name appears on the official census roll of the Tribe dated January 1, 1937, or on the official membership roll of the Tribe as of August 3, 1956, shall be eligible for membership, provided that such person is not a member of any other Federally recognized Tribe.
- (c) Any child born to a member of the Peoria Tribe shall be eligible for membership; provided such person is not a member of any other Federally recognized tribe.

Following the instructions provided below, complete the membership application on the back of this sheet, the attached Family Tree with Tribe and Blood Degree and the Consent for Release of Information form. **The application must be signed and notarized. Applications without notarization and an original State Certified Birth Certificate will not be accepted.**

1. An **original Long form State Certified** Birth Certificate (**before any changes** by amendment, adoption, court order, additions, etc.), showing the applicant is the biological child or biological descendant of an enrolled tribal member, must accompany the notarized application. The State Certified Birth Certificate must show the full name of the applicant as well as the full name of the parent(s) (as they are/were listed on their current long form state certified birth certificate) which must include maiden name. For information on how to obtain an ORIGINAL LONG FORM STATE CERTIFIED Birth Certificate, please contact the Enrollment Office at (918) 540-2535 or (800) 259-9987.
  - o If the original State Certified Birth certificate has had any change or is an amended/adoption/ court ordered changed State Certified Birth certificate; the original State Certified Birth Certificate (before the change) and all legal documentation (such as, court order, affidavit of paternity, adoption decree, etc.) must be submitted at the time of application to show the applicant is the biological child or the biological descendant of an enrolled tribal member. The new current legal original long form state certified amended/adoption/court ordered/addition information added, birth certificate must be submitted with the application.
2. No person applying for membership or who is a current tribal member with the Peoria Tribe may be enrolled with another tribe. Dual enrollment is grounds for rejection of membership or disenrollment.
3. Applications for minors (person under the age of 18 years) must reflect signature and notarization on behalf of the minor by the **legal custodial parent** or legal court appointed guardian.
  - o In the event of a legal court appointed guardian; all legal documentation (court order, etc.) must be submitted at the time of the application.
  - o In the event of divorce, (legal copy of custody agreement must be submitted), the legal custodial parent must sign the application; or the non-custodial parent must have notarized written documentation, from the legal custodial parent, stating the non-custodial parent has permission to enroll the child.
4. Complete the attached Family Tree with Tribe and Blood Degree.
5. Complete the Consent for Release of Information form.



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6. Return (*please initial the following check off list of required items*):

- \_\_\_\_\_ Membership application instruction sheet (first page)
- \_\_\_\_\_ Check off sheet (this page)
- \_\_\_\_\_ Notarized membership Application
  - There cannot be any form of alteration to the notarized portion of the application: white out/crossing out of name or information. Any form of change will considered an altered and incomplete application and will be cause for return (to you). A new application will have to be completed.
- \_\_\_\_\_ Original (at the time birth) Long form State Certified Birth Certificate (**before any changes**)
  - If changes to original State Certified Birth Certificate were made, also include: Current legal Long form State Certified birth certificate and all legal documentation related to the cause for change of that original (at birth) State Certified Birth Certificate.
- \_\_\_\_\_ Additional documentation to establish identity such as marriage license to confirm name change through legal valid marriage or any other supporting documentation the applicant(s)/representative would like to have the Enrollment Committee review (court ordered name change, etc.)
- \_\_\_\_\_ Family Tree with Tribe and Blood Degree
- \_\_\_\_\_ Consent for Release of Information

***Peoria Tribe of Indians of Oklahoma***

***Attn: Enrollment Office***

***P.O. Box 1527***

***Miami OK 74355***



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## MEMBERSHIP APPLICATION

**TO BE COMPLETED BY ALL APPLICANTS NOT LISTED ON THE  
JANUARY 1, 1937 OR AUGUST 3, 1956 ROLLS**

**Full Name:** \_\_\_\_\_  
(Last) (First) (Full Middle Name) (Maiden)

Please list all other names by which you have been known: \_\_\_\_\_

**Address:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**City:** \_\_\_\_\_ **County:** \_\_\_\_\_

**State/Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Is the applicant an adopted child? Yes \_\_\_ No \_\_\_**

**Are you an enrolled member of another Tribe?:** Yes \_\_\_ No \_\_\_

If yes, what Tribe?: \_\_\_\_\_

### DEGREE OF INDIAN BLOOD CLAIMED:

\_\_\_\_\_ **Peoria Tribe** \_\_\_\_\_ **Other (Degree and Tribe)** \_\_\_\_\_ **Total Degree**

**Indian Parent Name:** \_\_\_\_\_ **(Father) Tribe:** \_\_\_\_\_

**Indian Parent Name:** \_\_\_\_\_ **(Mother) Tribe:** \_\_\_\_\_

**Is your Indian father or mother enrolled with another Tribe other than Peoria?:** Yes \_\_\_ No \_\_\_

If yes, which parent and what Tribe?: \_\_\_\_\_

**For Minor children (under 18) only: Is the applicant under Divorce ordered custody** Yes \_\_\_ No \_\_\_

**PLEASE SEND APPLICANTS ORIGINAL STATE CERTIFIED BIRTH CERTIFICATE\***

\*Please note: A copy will be made by the Enrollment Office, placed in the file and original returned to the submitter.

### Notice of Statements and Submissions.

Falsification or misrepresentation of information on this application is punishable under Federal Law, 18 U.S.C. 1001. Conviction may result in a fine and/or imprisonment of not more than 5 years.

*I CERTIFY I/THE APPLICANT AM/IS NOT AN ENROLLED MEMBER OF ANY OTHER FEDERALLY RECOGNIZED TRIBE AND THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO CERTIFY THAT I/THE APPLICANT AM/IS PEORIA INDIAN BY BLOOD AND THE BIOLOGICAL CHILD OR BIOLOGICAL DESCENDANT OF A PERSON WHOSE NAME APPEARS ON THE OFFICIAL CENSUS ROLL OF THE TRIBE DATED JANUARY 1, 1937 OR THE OFFICIAL MEMBERSHIP ROLL OF THE TRIBE AS OF AUGUST 3, 1956.*

\_\_\_\_\_  
**Signature of person filing application** **Relationship to applicant** **Date**

### ACKNOWLEDGEMENT

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 of \_\_\_\_\_

On \_\_\_\_\_ 20\_\_\_\_ before me, \_\_\_\_\_  
(date) (insert name and title of the Notary)

Personally appeared \_\_\_\_\_ who proved to me on the basis of satisfactory evidence to be the  
(Full legal name: first, middle and last of person signing the application)

Person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature: \_\_\_\_\_

(Seal)

My Commission expires: \_\_\_\_\_

FAMILY TREE WITH TRIBE AND BLOOD DEGREE

GREAT GRANDFATHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GREAT GRANDMOTHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GREAT GRANDFATHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GREAT GRANDMOTHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GREAT GRANDFATHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GREAT GRANDMOTHERS  
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BLOOD DEGREE:  
DOB:

GRANDFATHERS  
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TRIBE:  
BLOOD DEGREE:  
DOB:

GRANDMOTHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GRANDFATHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

GRANDMOTHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
DOB:

FATHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
D.O.B.:

NAME:

TRIBE:  
BLOOD DEGREE:  
D.O.B.:

MOTHERS  
NAME:

TRIBE:  
BLOOD DEGREE:  
D.O.B.:



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## Consent For Release of Information

I \_\_\_\_\_, hereby authorize and give consent for the Peoria  
(person/custodial parent or guardian)

Tribes to investigate the possibility of enrollment for \_\_\_\_\_,  
(person, if over 18, or child, if under 18)

Date of Birth \_\_\_\_\_, Social Security Number \_\_\_\_\_ with

any Federally recognized Tribe, as the Peoria Tribe prohibits dual enrollment. I authorize the release of any membership request sent by the Peoria Tribal Enrollment Office.

Date \_\_\_\_\_

Signed: Person or Custodial parent or legal guardian