

# Membership Application/Renewal Form



<b>Adult or Minor (Please Circle)</b> (Under 18)		<b>Enrollment #</b> _____ (For Office Use Only)	
<b>A: Name:</b> (Last, First, Middle)			
Date of Birth:		Place of Birth: (City/Parish/County/State)	
Mailing Address:			
City:		State:	
Home Phone:		Zip Code:	
Cell Phone:		Email:	
<b>B:</b>			
Natural Father's Name:		Enrolled with the Tribe <b>Yes or No</b>	
Natural Mother's Name: (Include Maiden)		Enrolled with the Tribe <b>Yes or No</b>	
Please Check Box that Applies: <b>YES</b> , Applicant's Parents were Married <b>NO</b> , Applicant's Parents were <b>NOT</b> Married			
<b>C: SECTION C TO BE COMPLETED ONLY IF APPLYING FOR MEMBERSHIP OF A MINOR</b>			
Name of Person Preparing Application: (Last, First, Middle)			
Address:		Phone:	
City:		State:	
Zip Code:		Relationship to Applicant:	
Email:		<b>D: If you are eligible or currently enrolled as a member of another tribe. (Include proper documentation)</b>	
Name of Tribe:		City, State:	
Enrollment Number:		<b>E: List ANY other names you have been known by (Maiden, Married, Aliases)</b>	
Names:			
<b>F: Check Box that Applies:</b>			
Single		Married	
Divorced		Widowed	
(If Married, include Marriage License)		(If Divorced, include Divorce Papers)	

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<b>G. New applicants shall pay a non-refundable enrollment fee, which includes their annual membership dues if their application is approved per the following schedule:</b>			
<b>New Applicants:</b>			
Age 0-21	\$10.00	Age 22-61	\$25.00
		Age 62 and Older	\$10.00
<b>H. Renewing members shall pay a non-refundable annual processing fee. All members must provide an annual update of their current mailing address, phone number and email addresses.</b>			
<b>Renewing Members:</b>			
Age 0-21	\$10.00	Age 22-61	\$25.00
		Age 62 and Older	\$10.00
<b>I. A member in good standing shall have the option of purchasing a lifetime membership.</b>			
<b>Lifetime Membership Fees</b>			
Age 0-10	\$100.00	Age 11-21	\$200.00
		Age 22-61	\$400.00
		Age 62 and Older	\$100.00
<b>J. Membership fees may be waived if the applicant has attended two approved events or volunteered to serve tribe in the prior year.</b>			
<b>The following events or volunteer positions are approved:</b>			
Annual Pow Wow			
Annual Meeting			
Board Meeting			
Mother's Day Event			
Serve on the Board of Directors, Tribal Council, Council of Elders, or as an Officer			
❖ Membership will not be granted without a copy of your birth certificate and marriage license is applicable.			
❖ If you have any questions, feel free to contact Dee Niette Thompson at 251-850-6406 or <a href="mailto:dee@adaicaddo.com">dee@adaicaddo.com</a>			
❖ Please follow our pages <a href="http://www.adaicaddo.com">www.adaicaddo.com</a> , <a href="https://www.facebook.com/AdaiCaddoNDNZ">www.facebook.com/AdaiCaddoNDNZ</a> , and <a href="https://www.facebook.com/groups/1273685987127692">www.facebook.com/groups/1273685987127692</a>			
<b>NOTE: Applications may take 6-8 weeks to process, provided all necessary documents are included with this application. Checks should be made payable to: CADDO ADAIS INDIANS. Please mail to: ADAI CULTURAL CENTER 4460 HWY 485 ROBELINE, LA 71469</b>			
<b>K: I CONFIRM THAT THE INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND CORRECT TO BEST OF MY KNOWLEDGE.</b>			
<b>Signature:</b>	<b>Printed Name:</b>	<b>Date:</b>	