

Membership Application/Renewal Form



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

Membership Application/Renewal Form



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:			
New Applicants:			
Age 0-21	\$20.00	Age 22-61	\$40.00
		Age 62 and Older	\$20.00
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.			
Renewing Members:			
Age 0-21	\$15.00	Age 22-61	\$30.00
		Age 62 and Older	\$15.00
I. A member in good standing shall have the option of purchasing a lifetime membership.			
Lifetime Membership Fees			
Age 0-10	\$150.00	Age 11-21	\$300.00
		Age 22-61	\$500.00
		Age 62 and Older	\$150.00
J. Membership fees may be waived if the applicant has attended two approved events or volunteered to serve tribe in the prior year.			
The following events or volunteer positions are approved:			
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 dee@adaicaddo.com			
❖ Please follow our pages http://www.adaicaddo.com and https://www.facebook.com/AdaiCaddoNDNZ			
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			
K: I CONFIRM THAT THE INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND CORRECT TO BEST OF MY KNOWLEDGE.			
Signature:	Printed Name:	Date:	