

APPLICATION FOR ENROLLMENT
1107 GOLDFINCH RD.
HORTON, KANSAS 66439
785-486-2131

APPLICATION # _____

Applicant's Full Name: _____

Mailing Address: _____

City _____ State _____ Zip _____

SSN: _____ - _____ - _____ Date of Birth: _____

Degree of Indian Blood claimed: Kickapoo Tribe in Kansas _____
Other Tribe (name and amount): _____ Total _____.

Is applicant an enrolled member of another tribe? Yes _____ No _____.
If yes, please list state, tribe and degree

Have you ever received benefits (land, per capita education) as an enrolled member of another Indian tribe?
Yes _____ No _____.

Is applicant adopted? Yes _____ No _____
If yes, does applicant qualify for enrollment through natural parentage? Yes _____
No _____

Name of Applicant's Enrolled Parent(s): Mother: _____

Father: _____

Mother's Maiden Name: _____

When applying for membership the following items are needed to complete process. Certified copy of state birth certificate (your certified copy will be sent back after review) if the father is an enrolled parent and his name is **NOT** hand signed to the birth certificate a notarized paternity affidavit must be included. (Or one of the following CERTIFIED documents: signed birth certificate adjusted by law, court decree, probate record, DNA blood test.

DATE: _____

SIGNATURE OF APPLICANT/PARENT/SPONSOR
(If sponsor state relationship and documentation)