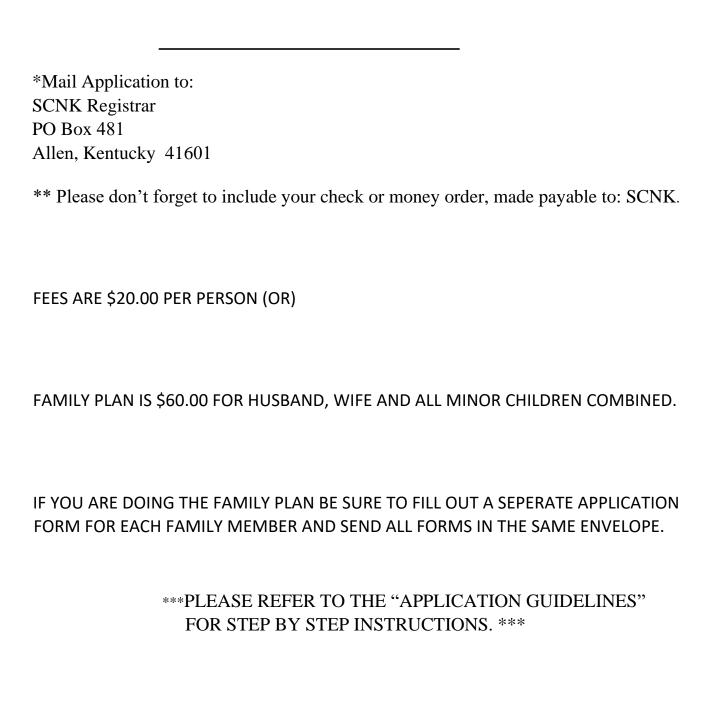
## SOUTHERN CHEROKEE NATION OF KENTUCKY

## TRIBAL ENROLLMENT APPLICATION

Principal Chief: Doug Mountain Spirit Vice Chief: Heather Autumn Breeze

Registrar: Larisa White Owl Speaker: Russell White Wolf

| LAST NAME                  |                  | FIRST               | MIDDLE   |                                |
|----------------------------|------------------|---------------------|----------|--------------------------------|
| MAIDEN                     |                  |                     | Male     | Female                         |
| Physical Address           |                  | City                | State    | Zip                            |
| Mailing Address            |                  | City                | State    | Zip                            |
| Date of Birth:             |                  |                     |          |                                |
| _                          | MO Day           | Year                | LAST I   | FOUR of Social Security Number |
| Phone Numbers: (-HOME WORK | CELL             | ()                  | (-       | )                              |
| E-Mail Address:            |                  |                     |          |                                |
| 1 am Applying for:         | BY BLOOD         | ASSOCIATE           | HONORARY | Y                              |
| I certify that I DO        | NOT belong to an | other Indian Tribe: |          |                                |
| Signed (In Ink)            |                  |                     |          | Date                           |
| Guardian Signature         | ):               |                     |          |                                |



\*\*\*The Legal Physical address that will be entered on your ID CARD MUST be a E911 COMPLIANT address. Communication to Mailing address can be a PO BOX or FBO\*\*\*\*