



Three Affiliated Tribes of the Fort Berthold Reservation
Office of Tribal Enrollment
 P.O. Box 100
 New Town, ND 58763

Tribal Identification Card Application

***** Mail Order Fee: \$15.00 Money Order made payable to "TAT Enrollment"*****

Full Legal Name: _____

Date of Birth: ____/____/____ Social Security Number: ____-____-____

Do you want your SS# on your Tribal ID? YES___ NO___

Current Mailing Address: _____

Current Street Address: _____

Primary Telephone Number: _(_____)_____-_____

Physical Characteristics

Gender: _____ Height (ft/in): _____ Weight (lbs): _____

Hair Color: _____ Eye Color: _____

<p><u>*Signature*</u> Sign within box borders.</p>	
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Printed Name: _____

Signature: _____

State of: _____)

County of: _____)

Subscribed and sworn before me this _____ day of _____, 20____

Notary Public: _____ My Commission Expires: _____

(SEAL)

Must be notarized to be accepted.

Updated Photo is required if not taken within 1 (one) year at the Office of Tribal Enrollment.
 Age 18+ must request their own. Under Age 18 must be requested by parent/legal guardian.
 Faxed/Emailed Applications will **NOT** be accepted. Original form must be mailed.