

# INSTRUCTIONS IN APPLYING FOR MEMBERSHIP WITH THE CADDO NATION

→ (Read Instructions **BEFORE** Completing Application) ←

▶ **APPLICATION WILL NOT BE ACCEPTED WITHOUT ALL DOCUMENTATION** ◀

The Membership Application for enrollment with the Caddo Nation, the attached sheet, should be completed showing your relationship to an enrolled member and/or members on the maternal and/or paternal side. Include maiden and married names of the women listed on your form.

## **QUALIFICATIONS:**

All living lineal descendants of Allottee(s), of at least one-sixteenth (1/16) degree Caddo Indian Blood, born after the date of the adoption of the constitution (June 26, 1976), except those persons otherwise entitled to enrollment with the Caddo Nation who elect to be enrolled in another tribe.

## **REQUIRED DOCUMENTS:**

1. Submit Applicant's **ORIGINAL STATE CERTIFIED BIRTH CERTIFICATE**. Our office must copy from the original document. If mailed in, the original will be returned to you via certified mail.
2. Submit Applicant's **SOCIAL SECURITY CARD**. Our office must copy from the original document. If mailed in, the original will be returned to you via certified mail.
3. Complete the **FAMILY TREE** form. This information pertains to the applicant's genealogy on both sides of his/her family.
4. If you own trust property, submit Individual Indian Monies (IIM) Account Number. (eg. 806U123456)
5. If parents, grandparents, great-grandparents, are not on the Caddo Roll, it is **REQUIRED TO SUBMIT ORIGINAL STATE CERTIFIED BIRTH CERTIFICATES on each person** that links applicant to the nearest Caddo Allottee.
6. Copies of Court Proceedings, Probating the Estate of your deceased ancestor(s), are encouraged. *Submit a copy with your application if there have been such proceedings.*
7. In cases of Adoption, Caddo Blood quantum must be proven on the natural parent(s). *A notarized copy of Adoption Proceedings must be submitted with the application.* The notarized copy will remain on file. **ORIGINAL STATE CERTIFIED BIRTH CERTIFICATES before and after adoption is REQUIRED.**
8. If you go by a different name, other than what is on your Birth Certificate, *then a notarized copy of legal name change is REQUIRED.* The notarized copy will remain on file.
9. For other Federally Recognized Tribal Blood quantum, other than Caddo Blood, *you will be REQUIRED to submit another form of documentation. (e.g. C.D.I.B. and/or Award Letter)*
10. **Regarding MINORS Only:** For applicants between the ages of 0-17 years. If you are not the biological parent of the applicant, submit legal guardianship documentation, such as a court order, which grants custody to you. Parent must sign application, if no legal custody documentation.
11. If a **NAME CHANGE** is needed, please send in supporting documentation (Marriage License, Court Order, etc.) If a change needs to be made and the member is under 18 years of age, then a parent or guardian must make the change.



**RETURN TO:**

Caddo Nation Enrollment Department  
P.O. Box 487  
Binger, Oklahoma 73009  
Ph: (405) 656-2344 ext. 221 / 257  
Enrollment Fax: (405) 656-2551  
Main Fax: (405) 656-2892

**MEMBERSHIP APPLICATION  
For Enrollment with the  
CADDO NATION**



**PLEASE PRINT CLEARLY**

Degree of Caddo Indian Blood: \_\_\_\_\_

1. APPLICANT'S NAME: \_\_\_\_\_

Maiden, Indian or other name by which known: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ SSN: \_\_\_\_\_ GENDER:  Female  Male

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Message #: \_\_\_\_\_

Email: \_\_\_\_\_ Marital Status: \_\_\_\_\_

**VITAL STATISTICS:**

Hospital/Facility: \_\_\_\_\_

Birth City: \_\_\_\_\_ Birth State: \_\_\_\_\_ Birth County: \_\_\_\_\_ Birth Zip Code: \_\_\_\_\_

2. Yes No - Is Applicant Adopted ***If Yes, please submit the Final Decree of Adoption***

3. Yes No - Has the applicant's Birth Certificate been amended? ***If Yes, please provide documentation***

4. Yes No - Do you have Indian Blood from another Indian Tribe? ***If yes, submit CDIB, tribal verification***

If Yes, Name of other Tribe: \_\_\_\_\_ Degree of Blood: \_\_\_\_\_

Name of other Tribe: \_\_\_\_\_ Degree of Blood: \_\_\_\_\_

5. Yes No - Are you enrolled with another Indian Tribe as a member of that tribe?

If yes, Name of that tribe: \_\_\_\_\_

6. Yes No - If you are a member of another Indian Tribe, have you received benefits in Land or Money by virtue of such enrollment?

7. Yes No - Have you ever relinquished your rights with another tribe? If Yes, which tribe: \_\_\_\_\_

8. Give the NAME OF CADDO ANCESTOR and ALLOTTEE NUMBER of the Caddo Indian Allottee(s):

Allottee Name(s): \_\_\_\_\_ Allottee #: \_\_\_\_\_

9. What is the Relationship of the Allottee to you? \_\_\_\_\_

**CADDO NATION  
ENROLLMENT DEPARTMENT  
MEMBERSHIP RECORD**

**APPLICANT'S MOTHER**

MOTHER'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ENROLLED CADDO:  Yes  No ROLL #: \_\_\_\_\_ DEGREE OF CADDO BLOOD: \_\_\_\_\_

ENROLLED IN OR POSSESS BLOOD OF A TRIBE OTHER THAN CADDO:  YES  NO  NON-INDIAN

NAME OF OTHER TRIBE: \_\_\_\_\_ DEGREE OF BLOOD: \_\_\_\_\_

**APPLICANT'S FATHER**

FATHER'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ENROLLED CADDO:  Yes  No ROLL #: \_\_\_\_\_ DEGREE OF CADDO BLOOD: \_\_\_\_\_

ENROLLED IN OR POSSESS BLOOD OF A TRIBE OTHER THAN CADDO:  YES  NO  NON-INDIAN

NAME OF OTHER TRIBE: \_\_\_\_\_ DEGREE OF BLOOD: \_\_\_\_\_

DID YOU SERVE IN THE UNITED STATES MILITARY?  YES  NO  N/A

ACTIVE DUTY/RESERVE/NATIONAL GUARD: \_\_\_\_\_

BRANCH: \_\_\_\_\_

DATE ENTERED: \_\_\_\_\_ DATE DISCHARGED: \_\_\_\_\_

**PERSON COMPLETING THE APPLICATION FOR MINOR** (you must be the applicant's legal guardian or custodial parent)

Print Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Signature: \_\_\_\_\_

**REMEMBER TO KEEP ENROLLMENT FILE  
UPDATED. IF YOU HAVE A CHANGE OF  
ADDRESS OR NAME CHANGE, PLEASE  
CONTACT THE ENROLLMENT  
DEPARTMENT AS SOON AS POSSIBLE.**

**APPLICANT:** Please allow four (4) to six (6) weeks for processing once all documentation has been turned in. If the applicant is of other tribal descent, the application may take longer to process due to the length of time it takes to receive verification from the other tribe(s).

**(Persons 18 years of Age or older must sign their own application.)**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **FAMILY TREE**

Please complete as much as you can of the Family Tree by writing the names of your ancestors on the **TOP LINE** provided.

**PLEASE PRINT CLEARLY**

<b>FATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDFATHER</b> TRIBE: _____ DEGREE: _____
	<b>GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDMOTHER</b> TRIBE: _____ DEGREE: _____
<b>MOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDFATHER</b> TRIBE: _____ DEGREE: _____
	<b>GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDMOTHER</b> TRIBE: _____ DEGREE: _____
<b>NAME OF APPLICANT</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____		<b>GREAT-GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDFATHER</b> TRIBE: _____ DEGREE: _____
		<b>GREAT-GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDMOTHER</b> TRIBE: _____ DEGREE: _____
		<b>GREAT-GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDFATHER</b> TRIBE: _____ DEGREE: _____
		<b>GREAT-GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDMOTHER</b> TRIBE: _____ DEGREE: _____
		<b>GREAT-GRANDFATHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDFATHER</b> TRIBE: _____ DEGREE: _____
		<b>GREAT-GRANDMOTHER</b> Tribe: _____ Degree: _____ Roll No. _____ Other Tribe: _____ Roll No. _____	<b>GREAT-GREAT-GRANDMOTHER</b> TRIBE: _____ DEGREE: _____