

New River Catawba Membership Application

P.O. Box 1265 Taylorsville, NC 28681

Please indicate the type of membership you are applying for. Information on each type and its requirements can be found on NewRiverCatawba.org. Please check only one:

Full- **Inter-tribal-** **Adopted-**

****If applying for Full Membership please list your GEDmatch kit # _____ ****

Please give the following information:

Full Legal Name

First Middle (Maiden) Last

Date of birth: _____ Place of birth: _____

Address: _____
Street

City State Zip

Phone #: _____ Email: _____

If you choose you may also enroll members of your immediate family. This includes children, grandchildren, spouse and siblings. If you are enrolling a sibling, please fill out a separate application for each and include a copy of your tree and documents. You must provide identification such as a Driver's License or Birth Certificate for each AND a \$5 per person yearly membership fee for each additional person enrolled under you.

SPOUSE (Adopted Members only). If your spouse qualifies to enroll as either a Full or an Inter-tribal member please fill out a separate membership form

Name _____
First Middle (Maiden) Last

Address: _____
Street City State Zip

Phone: _____ Email : _____

If enrolling grandchildren, please list them under their eligible parent. *If the parent is not joining, please check that box*

1. Child- Grandchild- Parent of grand child not joining- *

Name: _____
 First Middle (Maiden) Last

Address: _____
 Street City State Zip

Phone: _____ Email: _____

Date of birth: _____ Place of birth: _____

2. Child- Grandchild- Parent of grand child not joining- *

Name: _____
 First Middle (Maiden) Last

Address: _____
 Street City State Zip

Phone: _____ Email: _____

Date of birth: _____ Place of birth: _____

3. Child- Grandchild- Parent of grand child not joining- *

Name: _____
 First Middle (Maiden) Last

Address: _____
 Street City State Zip

Phone: _____ Email: _____

Date of birth: _____ Place of birth: _____

If you need more room please feel free to make as many copies as needed to enroll all of your family.
Please make 2 copies. 1 to mail in (see address at top) and 1 for your records.

I, _____, the applicant,

1. Certify that the information contained herein is true and correct to the best of my knowledge and belief.
2. Agree to abide by all rules and by-laws of New River Catawba.
3. By joining I am indicating I am not the member of any other Tribe.

Signature of Applicant _____

Date _____

Official use only: Approved- Disapproved- Pending- Date: _____

Full- Inter-tribal- Adopted- **Membership #** _____

Member ship fee paid- _____ ID paid: _____

Approved by: _____

We would love to hear your family stories about your Native American ancestors. Please feel free to tell us a little bit about how you found out about your Native American roots.

Please remember to include:

1. A copy of just your direct line tree back to your Native American ancestors. See example on the *Enrollment* page on the New River Catawba website
2. A copy of one form of proof linking each generation in your tree to the one previous. (See samples on web page under enrollment)

3. Money order or check for the \$5 membership fee/person. Please note this membership fee will be due each year 1 or Jan. 1st. Failure to pay will result in loss of membership.
4. Money order or check for \$15 for each member you are ordering a membership ID card for and a picture of each for the ID card.
5. Photo ID or Birth Certificate of each person who is enrolling.

PLEASE MAIL to: New River Catawba
PO Box 1265
Taylorsville, NC 28681

You will be notified by email, phone or electronic messaging, when you have been approved.