



SHERWOOD VALLEY BAND OF POMO INDIANS

Tribal Identification Card Application

Identity must be verified via photocopy of State Issued Identification attached (for self or the parent if requesting for a minor member) OR notarized to be accepted.

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

This is for a: Minor member Adult member

Full Legal Name: _____

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

Do you want your SS# on your Tribal ID? Yes ___ No ___

Current Mailing Address: _____

Current Physical Address: _____

Primary Telephone Number: (____) _____

Physical Characteristics

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

Hair Color: _____ Eye Color: _____

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

Signature: _____

State of: _____

County of: _____

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

Notary Public: _____ My Commission Expires: _____

(Seal)