DELAWARE TRIBE OF INDIANS
Enrollment Department
5100 Tuxedo Blvd.
Bartlesville, OK 74006
www.delawaretribe.org
918-337-6570 or 918-337-6583
Email: **enrollment@delawaretribe.org**
Fax: 918-337-6540

Brad KillsCrow
Chief

Tonya Anna
Assistant Chief

REQUEST FOR REPLACEMENT/RENEWAL CARD

Last Name	First Name	Middle Name

Other Name(s) – indicate maiden		Date of Birth	Place of Birth

Street	City	State	Zip

County	Phone #	Phone #

Email

Gender	Social Security #	Other Indian Blood
☐ Male ☐ Female		

☐ Yes ☐ No	Is applicant a veteran? If yes, please provide branch and years of service: _____
☐ Yes ☐ No	$10 Replacement Fee enclosed?
☐ Yes ☐ No	Copy of driver's license or other photo ID enclosed?

Please sign **both** the *signature line* verifying information and the *signature box* for the photo ID.

In presence of notary, applicant (if 18 or over) **MUST SIGN** *within box at right using a black sharpie for photo ID.*

REQUIRED:
Please attach a current passport-size photo here (if 18 or over) with full name written on back. Photo will not be returned.

_____
Signature of Applicant (if 18 or over)/Parent/Legal Guardian verifying above information.

State of _____ County of _____
Subscribed and sworn to before me this

_____ day of _____, 20_____.

_____
Notary
My Commission Expires _____

September 2021