

For Reference Only



Central Council of the Tlingit & Haida Indian Tribes of Alaska

Program Compliance | Andrew P Hope Building
PO Box 25500 | Juneau, Alaska | 99802

Affidavit for Tribal Identification Card

Full Legal Name: Sample Tribal Citizen Date of Birth: 01 / 01 / 1971

The following must be included for your affidavit to be complete:

- Affidavits cannot be accepted by fax or email.
- For a name change, please provide a copy of legal documentation of your name change.
- If you are 16 years of age or older, please sign inside the signature box of the affidavit.
- Attach a current head shot photo.
- Please ask the notary to place their stamp in a very small corner of your picture. DO NOT COVER YOUR PHOTO with the stamp.
- Legal guardians must provide copies of guardianship paperwork with the affidavit.
- Unless otherwise noted, your Tribal ID will be printed with the mailing address. Check box to print Physical Address.

Accepted Photos:

- Clear and in color
- Taken within the last 6 months to reflect your current appearance
- Taken in front of a plain neutral background
- Capture full face
- No hats or sunglasses

Community Registration

Please select your community registration. Tribal citizens who live within 100 miles of a Tlingit & Haida community (see below) are automatically registered to the community for voting purposes. Those who live more than 100 miles outside of a Tlingit & Haida community can register to the community of their choice (per Tlingit & Haida's Rules of Election). Voting community information is used for Tribal Elections and Tribal Enrollment reports.

<input type="checkbox"/> Anchorage	<input checked="" type="checkbox"/> Juneau	<input type="checkbox"/> Metlakatla	<input type="checkbox"/> Seattle
<input type="checkbox"/> Angoon	<input type="checkbox"/> Kake	<input type="checkbox"/> Pelican	<input type="checkbox"/> Sitka
<input type="checkbox"/> Craig	<input type="checkbox"/> Kasaan	<input type="checkbox"/> Petersburg	<input type="checkbox"/> Wrangell
<input type="checkbox"/> Haines	<input type="checkbox"/> Ketchikan	<input type="checkbox"/> Portland	<input type="checkbox"/> Yakutat
<input type="checkbox"/> Hoonah	<input type="checkbox"/> Klawock	<input type="checkbox"/> San Francisco	
<input type="checkbox"/> Hydaburg	<input type="checkbox"/> Klukwan	<input type="checkbox"/> Saxman	

For Office Use Only:

Staff Initials: _____ Date: _____ Card Issued: Yes No

Verified: Birth Certificate Guardianship Doc for Minor

1.800.344.1432 ext. 7146



enrollment@tingitandhaida.gov



www.tlingitandhaida.gov

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Full Legal Name: Sample Tribal Citizen Suffix: _____
Other Names Used (maiden, etc.): n/a
Date of Birth: 01 / 01 / 1971 Enrollment Number: 00001
Mailing Address: 123 Test St City: Sample State: Ak Zip: 00001
Physical Address: 123 Test St City: Sample State: Ak Zip: 00001
Phone Number: 123-456-7890 Email Address: Test @ Sample.com

Please complete this section if the Tribal ID card is for a minor

Affidavit filled out by (select one) Parent Guardian Parent/Guardian Full Name: _____

If you are the **Parent**, do you have legal authorization to sign on behalf of this minor? Yes No

Note: If you do not have the legal authorization to sign on behalf of this minor, we are unable to issue the Tribal ID card.

If you are the **Guardian**, do you have legal guardianship of this minor? Yes No

Note: If you do not have the legal guardianship of this minor, we are unable to issue the Tribal ID card.

Please sign in the middle of the signature box below if you are 16 years of age or older.

This signature will be placed on your Tribal ID.

Sample Signature

Sample Signature

This photo will NOT be returned.



Please make sure a small portion of the notary seal overlaps a corner of your picture. (Please do not stamp the face)



**Signature of Tribal Citizen or Parent/Legal Guardian of Tribal Citizen
(Must be signed in front of the Notary)**

Notice of False or Misleading Information

A person who commits fraud, misrepresentation, or falsification of records are subject to the penalties listed in Sec.15.01.009 of Tribal Statutes.

NOTARY ACKNOWLEDGEMENT

Subscribed and sworn to me
Before this 13 day of April, 2024

Sample Signature

NOTARY SIGNATURE

Notary Public in and for the State of Sample
Judicial District/County/Municipality of Sample
My Commission Expires 01/01/2030

