



**First Nation Chickamauga
FNC Native American Community Church**

Box 642 Middlebury, IN 46540. Ph.260-535-1536
firstnationchickamaugas@gmail.com fncnacc@gmail.com



Please return completed application to above address
including a self addressed stamped envelope and \$20.00
If joining our church, please send an additional \$10.00

Name _____ DOB _____ SS# _____

Address _____ Joining Tribal Church? Yes / No
Please Circle One

City _____ State _____ Zip _____ Clan _____

Phone _____ Email _____

All applicants must provide a copy of their current driver's license
Please include roll numbers and source - Baker, Dawes or other, to all ancestors with one.

Mother _____ Father _____

Maternal Grandparents:

Grandmother _____ Grandfather _____

Paternal Grandparents:

Grandmother _____ Grandfather _____

Maternal Great Grandparents:

Grandmother _____ Grandfather _____

Paternal Great Grandparents:

Grandmother _____ Grandfather _____

Child _____ DOB _____

Child _____ DOB _____

*** Additional family lineage or children can be placed on the back of this application ***

Signature _____ Date _____

Notary _____ Date _____

Do not write below this line; for tribal office use only

Accepted _____ **Tribal #** _____ **Denied** _____

Reason for being denied

_____ Tribal ID# _____ Date _____

Tribal Enrollment officer or representative