

**Caddo Nation of Oklahoma  
Tribal Enrollment**

Post Office Box 487  
Binger, Oklahoma 73009

Phone 405-656-2344 Fax: 405-656-2551



**REQUEST FORM**

**Item(s) Requested: (Please Check )**

- C.I.B – Certificate of Indian Blood (8x10 Printout)
- Membership Paper Card
- Membership Card with Photo
- Tribal I.D. Card with Photo (OK State Certified-Secondary I.D.- No Blood Degree listed)
- Hunting & Fishing License (Valid on Oklahoma WCD Lands only)
- Other: \_\_\_\_\_

**\*Tribal Members 18 years or older, will need to request their own information and sign form. Attach copy of Photo ID for verification before release of information.\***

Name of Tribal Member: \_\_\_\_\_

Enrollment Roll#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

S.S.N: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

County: \_\_\_\_\_

County: \_\_\_\_\_

Phone Number: \_\_\_\_\_  Home  Cell  Message

PLEASE SIGN: \_\_\_\_\_

DATE: \_\_\_\_\_

**FOR DEPARTMENT USE ONLY**

Roll #: \_\_\_\_\_ Blood Degree: \_\_\_\_\_

First Card Free

M.O./CC#: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Amount \$: \_\_\_\_\_  Replacement Card

Staff: \_\_\_\_\_

Date: \_\_\_\_\_