# Coosa Nation of North America (USA)
# National ID Request Form

**DATE: _____/_____/_____**

| ID Guidelines |
|---|
| ✓ Registration must be completed and registration number issued before a ID can be requested. |
| ✓ ID fee: $20 (Adult) and $10 (age 13-18) *Fee pays for ID and Postage |
| ✓ When requesting ID please attach clear passport picture. |
| ✓ **Return to: coosanationusa@outlook.com** |
| ✓ ***Please allow up to 2-4 weeks for processing.*** |

_____ _____ _____
**LAST NAME** **FIRST NAME** **MIDDLE NAME**

_____ **Male or Female** _____ _____ _____ _____
**NATIVE NAME** (Optional) **Circle** **HEIGHT** **WEIGHT** **EYE COLOR** **HAIR COLOR**

_____ _____ _____
**REGISTRATION #** **DOB** **PHONE NUMBER**

**PHYSICAL ADDRESS:** _____
**ADDRESS** **CITY** **STATE** **ZIP**

**MAILING ADDRESS:** _____
**ADDRESS** **CITY** **STATE** **ZIP**

***Emergency Contact***: In case of emergency please contact please contact

**Name**: _____ **Relationship**: _____

**Contact Information**: _____

**I hereby authorize that the above information if true and correct to the best of knowledge. Please sign fully inside the box below with permanent marker. This signature will be double as your ID signature. (If applying for minor please sign for them.)**

**Print Name:** _____ **Relationship:** _____

## FOR CNNA (USA) PERSONNEL ONLY

**ID # CN-**_____ **Issue Date**_____ Adult ☐ Minor ☐ **Photo Received** ☐

**Type of ID** Citizen **X** Officer ☐ _____ Group ☐ _____

Fee (_____) Paid ☐ **Data Entry Clerk**_____ Replacement ( )

**Department of Interior**
**PO Box 1841 Jackson, GA 30233**
**Office: (678) 752-8455 • coosanationusa@outlook.com**