



Tribal Enrollment Application

Name: _____

Birth Date: _____

Address: _____

SSN: _____

Phone #: _____

Check all that apply:

Shareholder of the King Cove Corporation at any time since incorporated in 1972 to July 1, 1989.

Biologic descendant of a King Cove Corporation Shareholder.

Biologic descendant of an Agdaagux Tribal Council Member.

I am currently enrolled in another tribe and am relinquishing my rights as a member to enroll in the Agdaagux Tribe of King Cove.

Tribe Name: _____ Copy of Relinquishment Attached: Yes No

Location: _____

If Applying For Membership As A Biologic Descendant Or As Adopted Member, Please Complete the Following:

Name of Person on KCC Shareholder's Roll or ATC Membership Roll: _____

Relationship: _____ Roll Number: _____

You Will Need To Send:

*A Copy of your BIA Certificate of Indian Blood (CIB).

*A Copy of a Birth Certificate, Affidavit of Paternity, Marriage Certificate, or Other Proof of Relationship To Member (Must Be Included With This Application as Documentation, If Not A Shareholder of The King Cove Corporation).

I Hereby Swear Under Penalty of Perjury That The Information Contained in This Application Is True And That I am Not Currently Enrolled To Any Other Federally Recognized Tribe.

Signature of Applicant

Date

Witness Signature

Date