

## PETERSBURG INDIAN ASSOCIATION

PO Box 1410 15 N. 12<sup>th</sup> Street

Petersburg, Alaska 99833 Phone: 907-772-3636

Fax: 907-772-3637

PIA Enrollment Number\_\_\_\_\_

## **Tribal Enrollment/Registration**

New applicants must provide a Certificate of Indian Blood - Tlingit & Haida card (with Blood Quantum). Copies of CIB and T&H Card must be attached to the application.

Last Name (please print)		First Name		Middle Name	Suffix
Other Names Used		Date of Birth			
Mailing Address	City, State	Zip Code	2	Phone Numb	per
Are you enrolled with an	nother tribe? No	Yes	Name of Tribe_		
NOTICE OF FALSE O	R MISLEADING	INFORMATION	<u>N</u>		
If the applicant is regist	tered with another	tribe he/she can	not enroll with I	Petersburg Indian A	Association.
[				Petersburg Indian A	
other state.					
other state. Signature of Applicant		am not du	nally enrolled wi		
I	ly	am not du	nally enrolled wi		Alaska or in
Signature of Applicant Administrative Use On Approved Da	ly ate:	am not du	Date PIA Card issued	th another tribe in	Alaska or in
	ly	am not duDateVerif	Date PIA Card issued	th another tribe in	Alaska or in