TASHKAHOMMA CLAN MEMBERSHIP APPLICATION

(FORM TC-A01)

Mail completed forms to our enrollment office:

Tashkahomma Clan 3075 West Fork Rd., Stout, OH 45684

*All personal information shared by applicants and members remains private between applicants or members and Tashkahomma.org. Applicant and member information is never shared with third parties. All applicant and member forms are stored securely at our enrollment office in Stout, OH. Applicants and members may at any time request their original application forms be returned to them and any personal information and/or documents will be deleted from the Tashkahomma.org database. More information is available upon request. Email us at info@tashkahomma.org or call us during our regular business hours at (580) 227–0976.

SECTION 1: GENERAL INFORMATION				
FULL NAME:				
First	Middle	Last		
DATE OF BIRTH:				
ADDRESS:				
Street Address		Apt/Suite		
City	State	Zip Code		
WILLING TO RELOCATE? Yes	S No (OK TX OH)			
EMAIL:				
SPOUSE (if applicable):				
NAMES OF ADOPTED CHILDRI	EN TO BE ENROLLED UNDE	R THE APPLICANT:		
	SECTION 2: ANCESTRY			
*Complete "Section 2: Ancestry" to descent from Tashkahomma and S assistance from one of our profess	imon P. Jones. Please contact i	only your direct lineal us if you require		
ATHERS NAME:	DATE OF BIRTH:	PLACE OF BIRTH		
MOTHERS NAME:	DATE OF BIRTH:	PLACE OF BIRTH:		

GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT GREAT GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT GREAT GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 3X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 3X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 4X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 4X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 5X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 5X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 6X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 6X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 7X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 7X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 8X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 8X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 9X GRANDFATHER:	DATE OF BIRTH:	PLACE OF BIRTH:
GREAT 9X GRANDMOTHER:	DATE OF BIRTH:	PLACE OF BIRTH:
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SEC	TION 3: Interests and Skills				
Check each box that applies as either an Interest or a Current Skill:					
Building and Framing	Gardening				
Farming	☐ Cooking				
Ranching	☐ Sewing				
☐ Wrangling	☐ Arts (beadwork,	clothing design,			
☐ Blacksmithing	painting, poetry,	song)			
☐ Bladesmithing	Spirituality				
Leathercrafter	Child Care				
	Other				
SEC	CTION 4: Comment Section				
*Please share any other information you f and concise manner.	feel would assist in processing your applica	ation in an informative			
*By signing this form I acknowledge, unders information shared with Tashkahomma.org to the best of my knowledge. I acknowled Tashkahomma.org for review only and the dependent not only on the accuracy of my in and family members. I acknowledge and unright to reject my application to this privar necessary. I acknowledge and understand the back to me, at any time, whether accepted o will be deleted from all Tashkahomma.org f	is voluntary. I verify that the information lge and understand that I am submitting hat my acceptance and enrollment in nformation but is also at the discretion of derstand that Tashkahomma.org and Tash te organization and private family with in hat I reserve the right to request that my or denied and that the entirety of my inform	I have provided is accurate the above information to the Tashkahomma Clan is Tashkahomma Clan leaders hahomma Clan reserve the no explanation provided or original application be sent			
Name	Signature	Date			
Please allow 4-8 weeks from the receip	t of any application to be contacted by an	enrollment coordinator.			