

# ***The Appalachian Cherokee Nation Tribe***



**Please complete the Application for Tribal Enrollment pages 2-4 below**

**This application must be filled out completely, (please make sure you print the information required) and returned to the address given below along with copies of Birth Certificates, death Certificates, Family Geanological Tree or any other legal documentation which designates that the person to whom it refers has American Indian Blood. Please note that the Authorization for Release of Information form must be signed before a notary. There is a notary block on the Authorization Letter. It is extremely important that you have the Authorization notarized before mailing it to our office. We will return your application to you if the Authorization For Release of Information has not been notarized. Sending the application in without this notarized document will delay the processing of your application.**

**Please make sure that you go over the application thoroughly and provide all the Information requested. Failure to do so will also delay processing of your application. Please do not leave any blanks. If you do not know the answer to a question, please put "Unknown" or "Not Applicable" in the data fields. Please provide as much information and documentation as possible. The more information and documentation will result in faster processing of your application.**

**Please submit two Passport type photographs (head shots) of yourself. One picture will be attached to your application and the other will be placed on your membership card. When your application package is complete and the Authorization for Release of Information has been notarized, please send the package with a \$25 dollar application fee which is non refundable to the below address.**

**The Appalachian Cherokee Nation Tribe  
P.O. Box 64  
Gore, Virginia 22637  
Attn: Roll Keeper**

**NOTE: Please, before sending your Applications to us, you must contact Principal Chief Marshall (Lone Wolf) Couch for a preliminary interview at 540-877-1450**

**Please be aware that the processing of your application can take up to two years, depending on the amount of information and documentation provided. If you are approved for membership, you are required to submit a annual Administrative Processing fee of \$25.00. If you have any questions while filling out the forms, please do not hesitate to contact the Tribal Office at 540-877-1450.**

# Application for Tribal Enrollment in the Appalachian Cherokee Nation Tribe

Please Print Clearly

Gender:  MALE  FEMALE

1. Applicant Name \_\_\_\_\_  
Last First Middle MAIDEN

2. Indian, maiden or any other names by which you are known:  
\_\_\_\_\_  
\_\_\_\_\_

3. Date of Birth/Place of Birth \_\_\_\_\_

4. Telephone Number: \_\_\_\_\_, Email: \_\_\_\_\_

5. Address/City/State/Zip: \_\_\_\_\_  
\_\_\_\_\_

6. Is your Birth Certificate on file with our Office?  YES  NO  
(If not, please submit a copy with your application)

7. What is your degree of Indian/Native American Blood line? (If known)  
\_\_\_\_\_

8. Give the name of the Cherokee Indian/Native American Ancestor through whom eligibility for enrollment is claimed:  
\_\_\_\_\_  
\_\_\_\_\_

9. What is the relationship of the above individual to you? \_\_\_\_\_

10. Do you possess Indian/Native American Blood of another tribe:  YES  NO  
(If yes, indicate what other tribe): \_\_\_\_\_

11. Are you enrolled with another tribe?  YES  NO  
(If yes what other tribe): \_\_\_\_\_



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12. If yes to Number 11, have you received benefits in Land or Money by virtue of such enrollment?

YES       NO

13. In which area did your Indian/Native American Ancestors reside:

Northeaster Area \_\_\_\_\_, Central Area \_\_\_\_\_, Southern Area \_\_\_\_\_, Others \_\_\_\_\_

14. Name of Applicant's Spouse \_\_\_\_\_

15. Name of Tribe and Degree of Indian/Native American Blood of Spouse: \_\_\_\_\_

16. Applicant's eligible children (A separate and complete application must be filed for each child to become enrolled as a member of this Tribe)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Date of Application \_\_\_\_\_

18. \_\_\_\_\_  
Applicant's Name (PLEASE PRINT)

19. \_\_\_\_\_  
Applicant's Signature

NOTE: Minor child's application must be signed by a legal adult or guardian

***THE APPALACHIAN CHEROKEE NATION TRIBAL COUNCIL RESERVES THE RIGHT TO ACCEPT OR DENY ANY APPLICATIONS WITHOUT RECOURSE OF JUDGEMENT FROM ANY AND ALL MEMBERS AND NON-MEMBERS AND OR APPLICANTS.***

**ALL MATERIALS SUBMITTED BECOME THE PROPERTY OF THE APPALACHIAN CHEROKEE NATION TRIBE**

**DO NOT WRITE BELOW THIS LINE FOR TRIBAL USE ONLY**

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Application Accepted

Application Denied

If application is denied, state reason(s) for denial in a letter to the applicant, a copy to be retained by enrollment committee

ROLL NUMBER: \_\_\_\_\_

Signature: \_\_\_\_\_



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## Authorization for Release of Information

I \_\_\_\_\_ authorized the release of information requested by the registration department of the Appalachian Nation Cherokee, Inc.

The requested information shall be solely used in the administration of registration and related programs. Agencies that may be contacted include; Program Services of the Appalachian Nation Cherokee. Bureau of Indian Affairs (B.I.A.), other Indian/Native American Tribes, U.S. Government Bureau of Vital Statistics, The Mormon Church, as well as other Churches in your area, but are not limited to Indian Health Service, School authorities, local state and Federal agencies. The requested information will **NOT** be given in any shape or form to private individuals or organizations.

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Printed Name of Applicant or Legal Guardian

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Signature of Applicant or Legal Guardian

**Statement of Entries:** Whoever, in any matter knowingly and willfully falsify, conceal, cover up or makes any false, fictitious or fraudulent statement of entry, the application(s) will be denied and returned minus the application fee.

**Notary:**

