

THE SNOHOMISH TRIBE OF INDIANS UPDATE REQUEST FORM

KEASUN F	OR UPDAT	E REQUEST	DA	\ E:				
_		hange []Change of Enrollment Secr			_	_		
	-						a copy of your marriage	
		tion papers or other						
NAME used at Time of Enrollment					Naiden Name	Enrollment Number if Known		
Change NAMI	E to read (First, M	iddle, Last)		I		1		
Current Mailin	g Address							
City					State Zip Code			
Email Address					Home Telephone Number Cell Number			
Weight	eight Height Hair Color		Eye Cold	or	Military Service		 No []	
	l reigni				Branch		1[1	
			YOUR	SPOUSE		T = =		
SPOUSE NAME (First, Middle, Last)					Date of Birth	MARR	IAGE DATE	
MAIDEN NAME OF SPOUSE					WHERE MARRIED			
Attach a copy of your marriage certificate for a name change due to marriage or a copy of current driver's license due to divorce or legal name change								
I CERTIFY THAT I AM NOT AN ENROLLED MEMBER OF ANY ANOTHER TRIBE OR BAND OF INDIANS OR ALASKAN NATIVES AND THAT ALL STATEMENTS AND								
INFORMATION PROVIDED BY ME FOR ENROLLMENT TO THE SNOHOMISH TRIBE OF INDIANS, TO THE BEST OF MY KNOWLEDGE, ARE TRUE AND CORRECT								
Signed by on								
If you are submitting a change for a minor, or for someone other than yourself, please provide the nature of your relationship. circle: (mother) (father) (grandmother) (grandfather) (legal guardian) (otherexplain)								
(5)	(3 - 1 - 1 - 7 / 1 - 3 -	3						
Print Your Name (First Middle Last) Sign				Signature	iture			
Your Telephor	ur Telephone # Your Email address				S			
			CHEC	CKLIST				
		iage License/Adoption			fee is Up-to-Date Supporting documer	ntation En	closed	
[] A nn		nclosed \$20 for Individ	dual \$30 for Family	(includes all o	hildren living in the	same hous	sehold)	
ſ 1 Indi	List Family Me vidual Catch-Up A	embersssessment Enclosed \$	40 [] Family	Catch-Up Asse	essment Enclosed \$6	50		
[] Req	uest for a new STI	ID Card (Pink paper) \$	5 fee enclosed. As	sessment has	been paid within the	last two	years Note: this will bring your	
assess	ment current)	1.5 Can a \$ 10 100 Chick	<u> </u>				Total IIII III III III III III III III III	
[] Oth [] FEE	er explain_ S Enclosed. Chec	k made payable to: Th	e Snohomish Tribe	of Indians				
Enclos	sed Payment che	eck #	date	d	in the amou	nt of		
Mail Co	mpleted form, payn	nent and supporting doc	Sno 979	collment Secreta chomish Tribe o 22 Edmonds Wa monds, WA 980	of Indians ay, #267			

Email Address: enrollmentsecretary@outlook.com STI Homepage: www.Snohomishtribe.org



THE SNOHOMISH TRIBE OF INDIANS FEE SCHEDULE



ASSESSEMENTS MUST BE PAID TO REMAIN IN ACTIVE STATUS

- Individual Annual Assessment: \$20.00
 - This amount is assessed every year, after enrollment, to remain in active status.
- Family Annual Assessment: \$30.00
 - This amount includes you and all of your children that are 18 years and under living with you. If you have children (24 years or less) in college, they are also included.
- **❖** Individual One Time Catch-Up Assessment: \$40.00
 - If you have not paid your assessments in several years this will bring you up-to-date.
- Family One Time Catch-Up Assessment: \$60.00
 - If family assessments have not been paid in several years this will bring your family up-to-date.
- New Enrollment Fee: \$25.00
 - This includes your I.D. card and first year enrollment. You must complete and sign
 the enrollment application and we must have on file a copy of your state issued birth
 certificate.
- **❖** Card Replacement Fee: \$5.00
 - We will replace your pink paper card for a fee of \$5.00 if your enrollment file is up-to-date and your assessment has been paid within the last 2 years.
 - Elders age 75 years or older will continue to pay \$5 for a replacement ID card.
 - Please complete an Update form.
- Photo I.D. Card Fee: \$25.00
 - We will Create or Replace your Photo I.D. card for a fee of \$25.00 <u>if your assessment is current.</u>
 - Please complete a Photo ID Request form.



MEMBERS 75 YEARS AND OLDER ARE NO LONGER REQUIRED TO PAY AN ASSESSMENT FEE PER THE OCTOBER 2008 TRIBAL COUNCIL ASSESSMENT RESOLUTION



Contact the Enrollment Secretary (<u>enrollmentsecretary@outlook.com</u>) for the Enrollment Application, Photo ID or Update form.