

BEAR RIVER BAND of ROHNERVILLE RANCHERIA
246 KEISNER RD LOLETA, CA 95551-9707 PHONE 707-733-1900 FAX 707-733-7972



APPLICATION FOR ENROLLMENT

Name of Applicant: _____

Current Mailing Address: _____

Residence Address: _____

Home Phone: _____ Work or Message Phone: _____

Date of Birth: _____ Place of Birth: _____

Sex: Male Female Social Security: _____

Please indicate the ancestor for the Plan of Distribution through whom enrollment rights are claimed.

Name: _____
Last First Middle

Relationship to you: _____

Is/was the applicant or any ancestor of the applicant enrolled with another Tribe? Yes / No

If yes: _____

Name Relationship

Tribe, Band, Rancheria Roll Number

Pursuant to the Constitution of the Bear River Band of Rohnerville Rancheria, to remain a member in the Rohnerville Rancheria, and to exercise all rights and benefits thereof, it is necessary that you file with the Tribal Council written confirmation from the Tribe you are enrolled with that you have relinquished your membership in such other Federally Recognized Indian Tribe.

NAME AND ADDRESS OF APPLICANTS PARENTS OR GUARDIAN

Mother: _____
 Last First Middle
Other names by which known: _____

Mailing Address: _____

Residence Address: _____

Date of Birth: _____ Place of Birth: _____

Date of Death: _____ Place of Death: _____

Tribal Affiliation: _____ Roll Number: _____

Father: _____
 Last First Middle
Other names by which known: _____

Mailing Address: _____

Residence Address: _____

Date of Birth: _____ Place of Birth: _____

Date of Death: _____ Place of Death: _____

Tribal Affiliation: _____ Roll Number: _____

Guardian: _____
 Last First Middle
Other names by which known: _____

Mailing Address: _____

Residence Address: _____

Date of Birth: _____ Place of Birth: _____

Date of Death: _____ Place of Death: _____

Tribal Affiliation: _____ Roll Number: _____

Name of Court: _____ City _____ County _____ State _____

As an applicant for membership in the Bear River Band of Rohnerville Rancheria please understand that the burden of proof lies on you when determining your eligibility for enrollment. It is your responsibility to provide all required documentation before your application will be considered complete. Your application will not be reviewed by the enrollment committee until all documentation has been received.

All applicants must submit the following documentation:

Completed Enrollment Application

Certified original Birth Certificate

Copy of Social Security Card

Marriage Certificate (Both the applicants and the parents)

Complete Family History Tree Chart (Both Indian and Non-Indian Families)

Any child not born to a Tribal Member Mother requires DNA proof of Father

I swear, under the penalty of perjury that the information contained in this application and accompanying documents are true and correct to the best of my knowledge and belief. I also swear that I have supplied all relevant data that is intended to be submitted to the Bear River Band of Rohnerville Rancheria on the issue of enrollment.

Print Name of Applicant

Date

Signature of Parent/ Guardian

Date

FAMILY HISTORY FORM
*Information required for
 degree of Indian blood*

Applicant's Name _____
 DOB _____
 Tribe _____
 Roll No. _____

Father's Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Mother's Maiden Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Grandfather's Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Grandmother's Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Grandfather's Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Grandmother's Name _____
 DOB _____
 Tribe _____
 Roll # _____
 Degree of Indian Blood _____

Great Grandfather's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandmother's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandfather's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandmother's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandfather's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandmother's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandfather's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

Great Grandmother's Name _____
 DOB _____
 Tribe _____
 Degree of Indian Blood _____

