



Hoopa Valley Tribe

Enrollment Application Instructions

- **COMPLETE THE APPLICATION**, answer all questions. Applicants under the age of 18 years old will require a parent or guardian signature. Guardians must include a copy of the placement or court order of custody.
- **COMPLETE THE FAMILY TREE** to the best of your knowledge.
- **Attach a CERTIFIED BIRTH CERTIFICATE**. Please note: the original copy of the birth certificate will be kept in the applicants file. Applicants who are denied membership, all records will be returned by certified mail.
- **Attach** a legible **COPY** of the applicants **SOCIAL SECURITY** card.
- **MARRIED PARENTS APPLICANTS:** In order to include the biological fathers blood degree, parents must be married (9) nine months prior to child's birth. A legible copy of a certified copy of marriage license must be attached to the application.
- **UNMARRIED PARENTS OF APPLICANTS:** DNA testing is not required if eligibility is determined through the biological mother. However, DNA would be required if eligibility is determined through the biological father. Testing dates will be scheduled upon the receipt of payment. Individual testing costs are \$65.00 per person which can be paid by cash (In person only) or money orders. Money orders should be made payable to: HVT-Enrollment Department. **DO NOT SEND MONEY THROUGH THE MAIL FOR DNA TESTING.**

Applicants have 90 days to complete their application for enrollment. The HVT-Enrollment Committee reserves the right to deny incomplete applications remaining on file after 90 days. Completing all requirements for Enrollment is the responsibility of the applicant or the applicant's parents.

For more information please contact the Enrollment office at:
Telephone: (530) 625-4364 Ext. 210, or Email: hvt enroll@yahoo.com
761 Loop Road, P.O. Box 1348 Hoopa, Ca. 95546





Hoopa Valley Tribe Enrollment Application

This application is to be filled out thoroughly, answer all questions accordingly. The application must be signed by all tribal members by whom eligibility is to be determined through.

Applicants full name: _____

Mailing address: _____

City State Zip

Applicants who reside on the Hoopa Valley Indian Reservation, check which district you live in:

____ Campbell Field
____ Agency Field
____ Soctish/Chenone

____ Bald Hill
____ Norton Field
____ Hostler/Matilton

____ Mesket Field
____ Out of Town

Date of Birth : _____ Place of Birth : _____

Phone: (____) _____ Social Security Number : _____/_____/_____

Parent(s) Information:

Parents name : _____ Hoopa Roll # : _____

Relationship : _____ Parents Blood Quantum : _____

Parents name: _____ Hoopa Roll # : _____

Relationship : _____ Parents Blood Quantum : _____

Applicants total Hoopa Quantum Claimed: _____

Are either of the applicants parents enrolled as a member of another Tribe? If yes, please state:

Which Parent : _____ What Tribe : _____

Is the applicant an adopted child? Yes : _____ No : _____

Is the applicant enrolled with another Tribe ? Yes: _____ No: _____

Is the applicant a direct lineal descendant of a member if the Hoopa Valley Tribe? Yes: _____ No: _____



BY SIGNING THIS APPLICATION I ACKNOWLEDGE THE INFORMATION PROVIDED IS TRUE AND CORRECT. ANY APPLICANT DUALY ENROLLED IN ANOTHER FEDERALLY RECOGNIZED TRIBE WILL BE DENIED ENROLLMENT OR THEY WILL BE RELINQUISHED FROM THE HOOPA VALLEY TRIBE UPON DISCOVERY.

Mother Signature : _____ Date : _____

Father Signature : _____ Date : _____

Applicant Signature : _____ Date : _____

Other Signature: _____ Date : _____

Office Use:

Complete Packet turned in: Yes: ___ No: ___

Pending Status:

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Birth Certificate	Copy of Social Security
Date Received:	Date Received:
Comments:	Comments:

DNA Results:

Date Scheduled:	Results Received:

Comments: _____

Please Complete Family Tree
for Father and Mother's side of Family

Great Grandfather
Tribe & Blood Degree

Grandfather
Tribe & Blood Degree

Great Grandmother

Tribe & Blood Degree

Father

Tribe & Blood Degree

Great Grandfather

Tribe & Blood Degree

Grandmother

Tribe & Blood Degree

Great Grandmother

Tribe & Blood Degree

Applicant

Tribe and Blood Degree

Great Grandfather

Tribe & Blood Degree

Birth Date

Place of Birth

Grandfather

Great Grandmother

Tribe & Blood Degree

Mother

Tribe & Blood Degree

Great Grandfather

Tribe & Blood Degree

Grandmother

Tribe & Blood Degree

Great Grandmother

Tribe & Blood Degree

Dept: Hoopa Tribal Enrollment
530 625-4364 Ext. 210