



Wiyot Tribe

Dear Applicant

Enclosed you will find an enrollment application and a copy of the requirements for membership in the Wiyot Tribe. Please return the form to this office with the required documentation (**certified birth certificate**, complete family tree, etc.) to prove your eligibility for enrollment in the Wiyot Tribe.

All applications must be completed in full. If you have any questions regarding family tree or blood degree, please contact Bureau of Indian Affairs, Northern California Agency located in Redding, CA or our tribal office. For a copy of your certified birth certificate, contact Vital Records in the county of your birth.

For anyone enrolling a minor child, the tribal member parent is required to sign on behalf of the child. Extenuating circumstances will be determined on a case-by-case basis. Minor child(ren) enrolling based on father's lineage, **must submit additional paternity documentation** including but not limited to father's signature on Certified Birth Certificate, affidavit of paternity, etc.

This office will gladly assist you in any way we can. Please feel free to contact us at (707) 733-5055.

Respectfully,

Marilyn Wilson
Enrollment Coordinator



Wiyot Tribe

1000 Wiyot Drive, Loleta, CA 95551

NOTICE OF APPLICATION FOR MEMBERSHIP IN THE WIYOT TRIBE

Notice is hereby given that all persons requesting membership in Wiyot Tribe must file an application to be eligible. You must qualify under the following criteria:

- All persons with a minimum of 1/8 degree Wiyot Indian blood whose names appear on the base roll of the Wiyot Tribe, that is, on the official membership roll as of December 31, 1990, provided they are not an enrolled member of another tribe, reservation, band, or Rancheria, and;
- All persons with a minimum of 1/8 Wiyot Indian blood whose names appear on the list of Original Assignees/Inhabitants of the Table Bluff Reservation as approved by the Table Bluff Reservation Tribal Council on August 16, 1989, provided they are not an enrolled member of another tribe, reservation, band, or Rancheria, and;
- All lineal descendants of persons meeting the criteria set forth in subparagraphs 1 or 2, above, provided they are not enrolled as a member of another tribe, reservation, band or Rancheria, and;
- All other persons with a minimum of 1/8 degree Wiyot Indian blood, provided they are not an enrolled member of another tribe, reservation, band, or Rancheria.

Application forms must be completed, signed by the applicant or parent [or guardian] and have the following items attached:

- Certified birth certificate
- Completed family tree
- Any additional documentation to prove your eligibility

Applications of children of unmarried parents for enrollment through patrilineal blood degree or descendency shall require additional documentation. When both parents sign the birth certificate, this will be sufficient documentation. However, if only the mother signs the birth certificate, the Enrollment Committee may require proof of paternity at the applicant's expense. Rumor and undocumented speculation will not be sufficient to require paternity testing or proof of paternity.



Table Bluff Reservation Wiyot Tribe

1000 Wiyot Drive, Loleta, CA. 95551

ENROLLMENT APPLICATION

ANSWER ALL QUESTIONS :

APPLICANT'S FULL NAME _____

MAIDEN or OTHER NAMES YOU ARE KNOWN BY _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____ SEX _____

RESIDENT ADDRESS _____ CITY _____ STATE _____ ZIP _____ SSN# ____/____/____

TELEPHONE # () _____ MESSAGE/CELL# () _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

MARITAL STATUS: Married () Single () Divorced () Widowed ()

If Married, name of Spouse _____

FOR OFFICE USE ONLY

APPLICANT'S DEGREE OF INDIAN BLOOD: _____

Wiyot _____ Other Indian (specify tribe) _____

Other Indian (specify tribe) _____ Total Indian _____

LATEST CALIFORNIA ROLL NUMBER _____

GIVE NAME, PLACE AND DATE OF BIRTH FOR EACH OF APPLICANTS BROTHERS AND SISTERS

Name	Place of Birth	Birthdate	Tribe

GIVE NAME, PLACE AND DATE OF BIRTH FOR EACH OF APPLICANTS CHILDREN

Name	Place of Birth	Birthdate

HAS APPLICANT BEEN ADOPTED: No () Yes ()
 If yes, indicate prior name _____

ARE YOU AN ENROLLED MEMBER OF ANOTHER TRIBE: No () Yes ()
 If yes, indicate the name and address of the tribe you are enrolled in:

HAVE YOU EVER BEEN ENROLLED WITH ANOTHER TRIBE: No () Yes ()
 If yes, indicate the name and address of the tribe, the date of relinquishment or disenrollment, and reason for termination of membership:

NAME OF PARENTS:	DEGREE OF WIYOT BLOOD	OTHER INDIAN (Specify Tribe)
Mother _____		
Address _____		
Father _____		
Address _____		

NAME OF GRANDPARENTS:	DEGREE OF WIYOT BLOOD	OTHER INDIAN (Specify Tribe)
Maternal Grandmother	_____	_____
Maternal Grandfather	_____	_____
Paternal Grandmother	_____	_____
Paternal Grandfather	_____	_____

NATURAL MOTHER’S TRIBAL MEMBERSHIP

Is/was the applicants’ natural mother an enrolled member of the Table Bluff Reservation – Wiyot Tribe

Yes () No ()

If no, please indicate the tribe in which the applicant’s natural mother is enrolled

NATURAL FATHER’S TRIBAL MEMBERSHIP

Is/was the applicant’s natural father an enrolled member of the Table Bluff Reservation - Wiyot Tribe

Yes () No ()

If no, please indicate the tribe in which the applicants natural father is enrolled

I understand that as the applicant I HAVE THE BURDEN OF PROOF IN ESTABLISHING THAT I MEET ALL OF THE REQUIREMENTS FOR MEMBERSHIP IN THE TABLE BLUFF RESERVATION – WIYOT TRIBE, and therefore, as the applicant I should fully answer all questions in this application form and should submit to the Enrollment Committee all documents or other available information to support this application. Additional information in support of this application may be set forth on a signed separate sheet of paper and attached to this application. I further agree that I may be required to submit to DNA testing at my expense to substantiate my application.

I solemnly swear, under penalty of perjury that the foregoing statements made are true to the best of my knowledge and belief.

Dated this _____ day of _____; 2005 _____

SIGNATURES

Alternative - A

APPLICANT FILING FOR SELF

(Signature of applicant) _____

Alternative - B

SPONSOR (S) FILING ON BEHALF OF APPLICANT

The undersigned hereby certifies that this application is made and filed on behalf of the applicant and the sponsor is the applicant's (Circle the correct description) PARENT or RECOGNIZED GUARDIAN for the reason that the applicant is a MINOR, a MENTAL INCOMPETENT, INCAPACITATED, a PERSON IN THE ARMED SERVICES or OTHER SERVICES of the United States Government who is stationed outside the continental United States (Circle word or words indicating the reason why applicant does not file this application for himself.)

(Signature of Sponsor) _____

FAMILY TREE

Name _____ Tribe _____
Date of Birth _____ Place of Birth _____ State _____
California Roll No. _____ Degree of Indian Blood _____

FATHER'S FAMILY HISTORY

Grandfather's Name:
DOB: _____ Place of Birth _____
State _____ Tribe _____
Roll Number _____
Degree of Indian Blood _____

Great Grandfather Name:
DOB: _____ Place of Birth: _____
State _____ Tribe _____
Roll Number _____
Degree of Indian Blood _____

Great-Grandmother's Maiden Name:
DOB: _____ Place of Birth: _____
State: _____ Tribe: _____
Roll Number: _____
Degree of Indian Blood _____

FATHER'S NAME:

DOB: _____
Place of Birth: _____
State: _____
Tribe: _____
Roll Number _____
Degree of Indian Blood _____

Grandmother's Maiden Name:
DOB: _____ Place of Birth _____
State: _____ Tribe: _____
Roll Number: _____
Degree of Indian Blood: _____

Great Grandfather's Name
Place of Birth: _____
State: _____ Tribe: _____
Roll Number _____
Degree of Indian Blood: _____

Great Grandmother's maiden Name:
DOB: _____ Place of Birth _____
State: _____ Tribe _____
Roll Number: _____
Degree of Indian Blood: _____

MOTHER'S FAMILY HISTORY

Grandfather's Name:
DOB: _____ Place of Birth _____
State _____ Tribe _____
Roll Number _____
Degree of Indian Blood _____

Great Grandfather Name:
DOB: _____ Place of Birth: _____
State _____ Tribe _____
Roll Number _____
Degree of Indian Blood _____

Great-Grandmother's Maiden Name:
DOB: _____ Place of Birth: _____
State: _____ Tribe: _____
Roll Number: _____
Degree of Indian Blood _____

MOTHER'S NAME:

DOB: _____
Place of Birth: _____
State: _____
Tribe: _____
Roll Number _____
Degree of Indian Blood _____

Grandmother's Maiden Name:
DOB: _____ Place of Birth _____
State: _____ Tribe: _____
Roll Number: _____
Degree of Indian Blood: _____

Great Grandfather's Name:
DOB: _____ Place of Birth: _____
State: _____ Tribe: _____
Roll Number _____
Degree of Indian Blood: _____

Great Grandmother's maiden Name:
DOB: _____ Place of Birth _____
State: _____ Tribe _____
Roll Number: _____
Degree of Indian Blood: _____