

Website: ClarksPointVillageCouncil.org
On-Site Phone: (907)236-1435



Email: Tribaladministrator@clpvc.org
Administrator Phone: (907)843-2837

Clarks Point Village Council
Replacement Tribal Card

Applicant Information Section

Full Name: _____

Date of Birth: _____

Mailing Address: _____

Physical Address: _____

Phone Number: _____

Email (optional): _____

What address to you want printed on your tribal card (please only circle one)

Mailing

Physical

Photo on Tribal ID

If you would like an identification photo on your tribal card, you can make an appointment to have your photo taken in Clarks Point during regular business hours or you can submit recent photo via email to tribaladministrator@clpvc.org. CLPVC reserves the right to decline or request an alternative photo if submission is deemed inappropriate or if the quality of the photo isn't compatible with the tribal card machine.

Signature of Tribal Member

Date

or

Signature of Parent/Guardian of Tribal Member if under the age of 18.

Tribal Administrator Section Only

Tribal Administrator to verify above information with the Tribal Enrollment Log.

Blood Quantum %: _____

Tribal Enrollment #: _____

Administrator Signature

Date