

CDIB/Membership Application

Choctaw Nation of Oklahoma
CDIB/Membership Department
PO Box 1210 Durant, OK 74702



Phone: (800) 522-6170 ext. 4030
Fax: (580) 920-7001
Email: cdib-membership@choctawnation.com

Applicants under the age of 14 will need a parent or guardian's signature. Applicants over 14 years of age must sign the application if a photo is requested on card.

First Name (please print)	Middle	Last	Maiden
Physical Address	Mailing Address (if different)		City
State	Zip Code	County	Phone Number
Birthdate	Gender	Social Security Number	

Are you a Veteran or Active Duty? Yes No (circle one)

If yes, please provide one of the following documents to ensure veteran status is displayed on card:

- 1) Discharge Document
- 2) Active Duty Orders
- 3) VA Card

Signature _____

Date _____

Signature of applicant, or parent/guardian of minor
(Indicate relationship if other than applicant)

I certify that the information given in this application is true. I am eligible to be a member of the Choctaw Nation of Oklahoma as defined in the Constitution of the Choctaw Nation of Oklahoma. I understand that false or erroneous information can cause loss of membership. I am not a registered member of another tribe, nor am I registered to vote with another tribe.

* For all CDIB/Membership cards, the applicant must be verified. You may receive a letter requesting additional documentation.

**Please see attached FAQ for further detailed instructions