



HOW TO APPLY FOR CHOCTAW NATION TRIBAL MEMBERSHIP

To become a first-time member of the Choctaw Nation of Oklahoma, a New Tribal Membership Application is required. To avoid delays, follow all the instructions carefully and include the correct documents. If anything is missing or incorrect, your application may be delayed.

Step 1: Fill Out the Entire Application

- You must complete every section of the application. This includes:
 - Your full legal name (as shown on your birth certificate or legal documents)
 - Date of birth
 - Phone number (if applicable)
 - Email address (if applicable)
 - Social Security number
 - Physical address
 - Mailing address (if different from physical address)
 - Whether you were adopted
 - Choctaw biological parent(s) and grandparent(s) information (for females, include maiden and married names if applicable)
 - Read and mark the application attestations
 - Signature of the applicant or legal sponsor
 - If someone else is filling this out for you, they must also print their name and sign the application acting as the sponsor. If the sponsor is not a biological parent, we require legal documents (such as adoption papers, court orders, or guardianship paperwork) showing they can act for you.

Step 2: Include the Correct Documents

- You must include the following documents to prove your identity and family lineage:
- Social Security Number Verification
 - Send a copy of your Social Security card or another document that shows your full name and full Social Security number.
 - If you don't have either, see our FAQ for other options.
- Certified Birth Certificate
 - Must be an original certified copy from the state, showing:
 - Your full name, date of birth, and place of birth
 - Full names of your Choctaw biological parent(s)
 - A seal or stamp from the issuing office, state file number, and signature of the registrar
 - Filed with the state within 1 year of birth
 - If born outside the U.S., please see our FAQ.
- Name Change Documents (If your name changed after birth)
 - Send legal documents such as:
 - Marriage license
 - Divorce papers
 - Adoption records
 - Court orders
 - Paternity affidavits

MAILING ADDRESS: PO BOX 1210 | DURANT, OK 74702 | PHYSICAL ADDRESS: 1802 CHUKKA HINA | DURANT, OK 74701
580.634.0654 | 800.522.6170 | MEMBERSHIP@CHOCTAWNATION.COM

- Other Proof of Biological Parent(s) (If not listed on birth certificate)
 - Send one of the following:
 - DNA test results from an AABB-accredited lab showing a 95% or more match to a Choctaw parent. DNA test results must be sent to the Tribal Membership Office directly from the lab.
 - Other court-filed legal documents naming biological parent(s). These must be signed by a judge or stamped by the court.
 - Adoption Records (if you were adopted). The adoption documents must show the name(s) of the biological Choctaw parent(s).
- Sponsor or Guardian Documents (if someone else is applying for you)
 - Send legal documents showing they can act on your behalf.

Step 3: Tribal Membership Card

After your application is processed, you will receive one of the following:

- Verification Card – Confirms your tribal membership. Issued if you do not provide the extra documents needed for an ID card.
- Identification Card (ID) – Confirms your tribal membership and serves as a federally recognized ID (membership does not expire, but the ID function has an expiration date).
 - To receive an ID card, include with your application:
 - Passport-style photo (white background, no glasses/hat, forward-facing, chest and up)
 - One valid, unexpired secondary ID (Tribal Membership ID, State ID/Driver's License, U.S. Military ID, U.S. or Foreign Passport, Trusted Traveler ID, or contact our office for other options)

Step 4: How to Submit

- Mail or bring your application and original documents to the Tribal Membership Office.
- The mailing and physical address are at the bottom of the application.
- Important: The Choctaw Nation is not responsible for original documents lost in the mail. If possible, bring them in person.

Additional Notes

- We may ask for more documents during our review.
- Check the FAQ for help with special situations or missing documents.

References

- Choctaw Nation of Oklahoma Constitution:
 - www.choctawnation.com/about/history/historical-documents
- Choctaw Nation of Oklahoma Membership Act:
 - www.choctawnation.com/about/government/voter-registration/elections/tribal-codes
- Membership FAQs:
 - www.choctawnation.com/services/tribal-membership

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NEW TRIBAL MEMBERSHIP APPLICATION

| APPLICANT INFORMATION | | | | |
|--|---|-------------------------|-------------------------------|------|
| First name: | Middle name: | Last name: | Maiden name: | |
| Date of birth: | Social Security Number: | Phone Number: | Email: | |
| Physical address: | | City: | State: | Zip: |
| Mailing address (if different): | | City: | State: | Zip: |
| Adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No | If Adopted, please list adoptive parent(s) name(s): | | | |
| CHOCTAW BIOLOGICAL PARENTS AND GRANDPARENTS Use separate page for additional lineage if needed. | | | | |
| MOTHER - Mother's full name: | | Date of birth: | Date of death, if applicable: | |
| MOTHER'S MOTHER - Applicant's grandmother: | | Date of birth: | Date of death, if applicable: | |
| MOTHER'S FATHER - Applicant's grandfather: | | Date of birth: | Date of death, if applicable: | |
| FATHER - Father's full name: | | Date of birth: | Date of death, if applicable: | |
| FATHER'S MOTHER - Applicant's grandmother: | | Date of birth: | Date of death, if applicable: | |
| FATHER'S FATHER - Applicant's grandfather: | | Date of birth: | Date of death, if applicable: | |
| ORIGINAL ENROLLEE: | | Roll Number (if known): | | |
| ATTESTATION AND OATH Please read and mark each attestation below | | | | |
| <input type="checkbox"/> I certify that the information given in this application is true and I am eligible for membership as defined by the Constitution of the Choctaw Nation of Oklahoma. | | | | |
| <input type="checkbox"/> I am not a registered member of any other tribe or band of Indians as prohibited. | | | | |
| <input type="checkbox"/> I understand that false or erroneous information can result in denial of membership. | | | | |
| Signature of applicant OR printed name and signature of Parent/Guardian/Sponsor | | | Date: | |

TM New Application V102025

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