



## LITTLE SHELL TRIBE OF CHIPPEWA INDIANS OF MONTANA

511 CENTRAL AVENUE WEST, GREAT FALLS, MT 59404

P 406-315-2400/FAX 406-315-2401.

frontdesk@lstribe.org

**IF YOU DO NOT KNOW YOUR ENROLLMENT NUMBER, WE WILL RESEARCH IT FOR YOU**

**\$10.00 FEE MUST BE SUBMITTED WITH APPLICATION**

TO RECEIVE A TRIBAL IDENTIFICATION CARD. YOU MUST BE AN ENROLLED MEMBER OF THE LITTLE SHELL TRIBE

ENROLLMENT  
NUMBER \_\_\_\_\_

NAME FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

MAIDEN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

EYE COLOR \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

PHONE NO. \_\_\_\_\_

EMAIL  
ADDRESS \_\_\_\_\_

**PLEASE SEND A CLEAR, COLOR, CLOSE UP PHOTO - NO HATS PLEASE**