



CHEROKEE COMMUNITY OF PUGET SOUND (CC-PS)

<https://cc-ps.org/>

Membership Fee: \$25.00 (per year for household)

NAME: _____

Cherokee Nation Registry Number (please send copy of your ID card) _____

- Applying as **ASSOCIATE** (non-Cherokee or not registered Tribal Member)

Mailing Address: _____

TELEPHONE NUMBER(S): Home: (_____) _____

Cell: (_____) _____

E-MAIL ADDRESS: _____

DATE OF BIRTH (Month / Day / Year): _____

Have you ever served in the U.S. Armed Forces? Yes / No ____ If so, which branch? _____

Would you like to be on our email list? - Yes - No

Other members of household (for CC-PS membership roster purposes):

Name	Date of Birth	CN Registry Number (if applicable)

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Our directory will be mailed to all that agree to be listed. Are you willing to be listed in our membership directory?

(Please check all that apply)

- Name
- Email Address
- Phone Number
- City/State
- Address
- Birthdate / Month
- Other: _____

Any activities or areas of special interest in which you are interested in exploring in CC-PS:

Suggestions for speakers, programs, and activities:

Please mail your application, a copy of your tribal ID card, and payment to:

**Cherokee Community of Puget Sound
PO Box 591
Maple Valley WA 98038**