

**GUILFORD NATIVE AMERICAN ASSOCIATION, INC.  
MEMBERSHIP APPLICATION**

Mailing Address: P.O. Box 5623 Greensboro, NC 27435  
Physical Address: 925 Revolution Mill Drive, Suite 1  
Greensboro, NC 27401

**PLEASE SUBMIT YOUR APPLICATION AND SUPPORTING DOCUMENTS TO  
GUILFORDNATIVEAMERICAN@GMAIL.COM**

**MEMBER**

**ASSOCIATE**

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE # \_\_\_\_\_ CELL \_\_\_\_\_  
EMAIL \_\_\_\_\_

\*If applying for an Associate Membership, please skip to the bottom section of application and sign.

**FAMILY HISTORY**

NAME	RELATIONSHIP	AGE	TRIBE	TRIBAL ENROLLMENT #	GNAA MEMBERSHIP #

**PLEASE ATTACH SUPPORTING DOCUMENTATION**

Birth Certificate

Tribal Enrollment Card

Other

I certify that the information on this application and other documentation is true and correct.

Applicant's Signature \_\_\_\_\_

Article II, Section 2 of the Guilford Native By-Laws provides that membership and registration is required to be eligible to vote in the elections at the Annual Meeting. Section 3, provides that membership and membership cards will be issued on the basis of tribal affiliation. Proof of tribal membership or Indian identity is the responsibility of the individual seeking membership. In lieu of tribal membership, Indian identity may be established by presenting individual birth certificates.

**FOR GNAA MEMBERSHIP COMMITTEE APPROVAL**

Membership Approved by: \_\_\_\_\_  
Chairperson Executive Director