

Address Update Instructions

It is your responsibility to keep your address and the address of your enrolled minor child(ren) updated. This form must be completed, signed, and returned before any changes will go into effect.

Section 1: Member Information

- Enter your street address (required).
- Enter your mailing address if different from street address.
- Enter your phone number and e-mail. (Selecting a box will provide Internal Oneida entities to send notices for events, activities or job opportunities)
- GTC Meeting Information – Check this box to receive GTC Meeting notices and materials.
- Tribal Mailings – Check this box to receive tribal mailings for community event/activity notices.
- Kalihwisaks – Check this box to receive the tribal newspaper.

Please Note:

- o Most mailings are only mailed to one tribal member in a household.
- o **Required Mailings** (e.g. Payment Forms) will be mailed to every eligible member with an address on file, regardless of your selections on this form.
- o GTC meeting information, Kalihwisaks articles, and other Oneida Nation information can be found on the website - <https://oneida-nsn.gov/>.

Section 2: Member Signature

- Acceptable Signatures
 - o Tribal member listed on form.
 - o Guardian, conservator, or power of attorney. For a person filling out the form as a guardian/conservator/power of attorney, up to date and legally acceptable documentation related to the guardianship/conservatorship/power of attorney must be on file with the Trust Enrollment Department.
 - o A parent, legal custodian, or guardian of a minor child. For a person filling out the form as a legal custodian or guardian of a minor child, please provide documentation to the Trust Enrollment Department showing that you have been appointed as legal custodian or guardian.

Section 3: Enrolled Minor Children

- Complete this section to update the address of your ENROLLED MINOR CHILD(REN). This information is used to mail important information affecting their membership (e.g. Minors Trust Account Statements).

Incomplete forms may result in missed mailings

Submit your completed form to the Trust Enrollment Department:

- | | |
|--|---|
| - Mail: PO Box 365
Oneida WI 54155-0365 | - Email: trustenrollments@oneidanation.org |
| - Fax: (920) 869-2995 | - Online: https://oneida-nsn.gov/resources/enrollments/ |

Questions, please call: (920) 869-6200 or 1-800-571-9902

Trust Enrollment Department

PO Box 365, Oneida WI 54155
(920) 869-6200 * 1-800-571-9902
Fax: (920) 869-2995

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Address Update

SECTION 1: TRIBAL MEMBER INFORMATION

Roll Number:

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 Birth Date: _____

First Name: _____ MI: _____ Last Name: _____

Street Address: _____
REQUIRED STREET APT CITY STATE ZIP

Mailing Address: _____
COMPLETE IF DIFFERENT FROM STREET ADDRESS STREET OR PO BOX APT CITY STATE ZIP

***I authorize the Trust Enrollment Department to release my information for the following:**

Text Notices Email Notices

Phone #: _____ Email: _____

***I authorize the Trust Enrollment Department to release my information for the following:**

GTC Meeting Information Tribal Mailings Kalihwisaks Newspaper

SECTION 2: TRIBAL MEMBER SIGNATURE

I, the undersigned do hereby certify under penalty of perjury, that the information listed on this form is true and correct.

Signature: _____ Date: _____

SECTION 3: ENROLLED MINOR CHILDREN (Under Age 18)

Name	Birth Date	or	Roll Number
_____	_____		_____
_____	_____		_____
_____	_____		_____
_____	_____		_____