



YAVAPAI-APACHE NATION

TRIBAL ENROLLMENT DEPARTMENT

2400 West Datsi Street, Camp Verde, Arizona 86322

Ph: (928) 567-1008 / (928) 567-1029

CHECK PICK UP REQUEST FORM

Per Cap 2026

**** ONLY ONE CHECK PICK UP REQUEST FORM PER PERSON, PER DISTRIBUTION ****

NAME (Print) _____ DOB _____ ENROLLMENT # _____

PHONE # _____ EMAIL _____

I hereby authorize the Yavapai-Apache Nation Enrollment Department to allow:
(Must show valid ID upon Pick up)

NAME (PRINT) _____ DOB _____ RELATIONSHIP _____

To:

- Pick-up Check
- Add Name to Check & Cash/Deposit Check
- Other _____

Signature of Tribal Member (Signature of authorized representative) _____ Date: _____

**** MUST BE NOTARIZED ****

STATE OF _____

COUNTY OF _____

Subscribed and affirmed before me on this ____ day of _____,
20____ by _____, proved to me on the basis of satisfactory
evidence to be the person who appeared before me.

IN WITNESS WHEREOF, I have hereunto set my hand and
official seal.

Notary Public Signature: _____

Expiration Date: _____

NOTARY STAMP

FOR OFFICE USE ONLY

Received By: _____

Date: _____