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

Holiday Assistance 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

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

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:_____

Amended 10/23/25
MCW