

TULSA INDIAN CLUB, INC

MEMBERSHIP APPLICATION

Full Name: _____ Spouse: _____

Tribal Affiliation(s): _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Membership in other organization(s): _____

Would you be interested conducting a special workshop? Yes No

On what topic: _____

MEMBERSHIP IS \$20.00 ANNUALLY

I understand the By-laws of TICl and will abide by the said laws. I understand that TICl will not be held responsible for any accidents, injuries, or damages to self, and/or equipment while traveling to, from or during any functions, meetings or during the annual events of TICl, and hold them harmless from same, including Board of Directors, Agents and representative of same.

Signature of Applicant _____ Date _____

Signature of parent (if applicant under 18) _____ Date _____

Member submitting application for approval: _____

Date presented to the board: _____ Date Approved: _____

Tulsa Pow Wow - 7715 E 25 Place, Tulsa, OK 74129 - 918-671-2417 - tici@tulsapowwow.org

www.tulsapowwow.org