## **Tulalip Tribal Member Spouse Identification Card Form**

For YMCA, dump, and Tulalip Tribes employment use only



## NEW AND RENEWAL OF ID CARDS WILL ONLY BE DONE ON THURSDAYS

| Name  |                            |                  |   |            |               |  |
|---|----------------------------|------------------|---|------------|---------------|--|
| Height  | Weight                     |                  | Sex   | Date o     | Date of Birth |  |
| Spouse's Name                                   |                            |                  | Spouse's Tribal ID Number   |            |               |  |
| Street Address                                  |                            | City             |   | State      | Zip Code      |  |
| Phone   |                            | Email (Optional) |   |            |               |  |
| tribal member changes, I v                      | vill surrender this ID ca  | rd to the ei     | alip tribal member. If my sto<br>nrollment office. If I use this<br>financial cost that I have in | card in an |               |  |
| Please Check One  \$40 First Card  \$20 Renewal |                            |                  | NOTE: SPOUSE ID <i>CANNOT</i> BE USED FOR GAS DISCOUNT OR CIGARETTE DISCOUNT                      |            |               |  |
| Date  | Spouse's Signature         |                  |   |            |               |  |
| Date  | Signature of Tribal Member |                  |   |            |               |  |
|   |                            |                  |   |            |               |  |
|   |                            |                  |   |            |               |  |
|   | 0                          | FFICIAL          | USE ONLY  |            |               |  |
| Documents Attached                              |                            |                  |   |            |               |  |
| Marriage Certif                                 | ficate Valid ID            |                  | Receipt \$  |            |               |  |
| Date  | Enrollment Staff           |                  |   |            |               |  |