OSAGE NATION
CDIB/MEMBERSHIP
239 W. 12th St.
Pawhuska, Ok 74056
Phone:918-287-5389 Fax:918-287-5502
CDIB@osagenation-nsn.gov

DATE: _____

REPLACEMENT APPLICATION

Please check card(s) needing replaced:

☐ CDIB card- FREE

☐ Membership card- $10

Cash, check, or money order only

_____

First Middle Last

Mailing address:_____

DOB: _____ Phone_____

Email: _____

X_____

SIGNATURE OF ADULT APPLICANT OR GUARDIAN

RECEIVED VIA: WALK-IN MAIL FAX EMAIL

_____ _____

Date Issued Initials of Tech