



Pyramid Lake Paiute Tribe of Nevada
Pyramid Lake Tribal Enrollment Office
 PO Box 256, Nixon, NV 89424

EXPIRATION DATE ID CARD 18 AND OVER REQUEST FORM

SECTION 1: MEMBER INFORMATION

ROLL #: _____ BIRTH DATE: _____ TELEPHONE: (_____) _____ - _____

(PLEASE PRINT)

Member Name: _____
 LAST FIRST MIDDLE MAIDEN (IF ANY)

Physical Residence: _____
 Street Apt. # City State Zip Code

Mailing Address: _____
 City State Zip Code

Email Address: _____ *(Optional)*

SECTION 2: MEMBER ID DATA

Please update your information or indicate "No changes."

No Changes

Height: _____
 Hair/Eye Color: _____

Weight: _____
 SSN #: _____

(Optional - Card Copy Required)

SECTION 3: MEMBER SIGNATURE

The information provided above is true and correct to the best of my knowledge and belief. I understand that providing false information or misrepresentation of the information contained herein for the purposes of obtaining an Expiration Date ID Card is subject to penalty in accordance with applicable Tribal laws.

SIGNATURE: _____ DATE: _____

Check this box if the person signing above is the assigned Power of Attorney (POA) or Guardian of the enrolled member.

****For Office Use Only * ***

Card Issued: Yes No – Reason: _____

Card Type: ID TM Total Number Cards Issued: _____

Disposition: Mail Pickup

Date Issued: _____ By: _____

Tribal Enrollment Officer

PHONE: (775) 574-1000, Ext. 1115

FAX: (775) 574-1008

Email: plenrollment@pplt.nsn.us