



Tohono O'odham Nation
Membership Services - Enrollment Program
P.O. Box 250; Sells, AZ 85634
Telephone (520) 383-8700
Fax (520) 383-3694
tonenrollment@tonation-nsn.gov

INSTRUCTIONS FOR CHANGE OF ADDRESS

- **Name** – Please print your name legibly
- **Date of Birth** – insert your date of birth: MM/DD/YYYY
- **District** – Insert the district you are enrolled in
- **Enrollment number** - Insert your enrollment number, if you don't know your number, you can leave it blank, but please make sure you include your Date of Birth and Social Security number.
- **Social Security Number** – Insert your social security number, if you don't have one please leave it blank.
- **Mailing Address** - Insert your mailing address where you receive your mail, including city, state, and zip code.
- **Telephone Number** – Insert a contact number we can call to reach you if we have any questions.

- **Additional Family Members:**

Please list all family members that are enrolled and are under 18 years of age. Should you not know their enrollment # you may leave it blank, but make sure you include their date of birth and social security number.

If your children are over 18 years of age, they will need to submit their own form to update their address.

- **Signature** – Please make sure you sign at the bottom of the form
- **Date** – Please make sure you date the form.

Upon completion, you may mail, fax or email in the form. We will not accept an electronic signature on the form that is a preset font, we will only accept your original signature. Should you have any further questions please contact our office at the number listed above.