

DAVID HILL PRINCIPAL CHIEF DEL BEAVER SECOND CHIEF

INTAKE FORM

Please place a check by the typ	e of case you	need ass	istance with:	
□ WILL □ GUARDIANSHIP	□POV	VER OF A	TTORNEY	
WILL THIS CASE BE CONTESTED?	(Check one):	□ YES	□NO	
HAVE YOU EVER BEEN CONVICTED	D OF A FELONY	? 🗆 YES	□ NO	
NAME:Last	First			MI
DATE OF BIRTH:	ROLL #:			·
COUNTY OF RESIDENCE:				
ADDRESS:Street/P.O. Box	City	State	Zin	
TELEPHONE NO. s: (Mobile)(Work				
E-MAIL ADDRESS:				
ARE THERE ANY PARTIES INVOLVI	THE RESERVE OF THE PROPERTY OF	Child(ren),	Attorney(s), Pa	rents, etc. This should
ROLL #: PARTY: ADDRESS:	RELATIONS	HIP:PI	HONE:	DOB:
ROLL #: PARTY: ADDRESS:	RELATIONS	HIP:PI	HONE:	DOB:
ROLL #: PARTY: ADDRESS:	RELATIONS	HIP:PI	HONE:	DOB:
ROLL #: PARTY: ADDRESS:				
Please present a copy of you this	ur Citizenship S COMPLETED	Card and/ Intake Fo	or State Issu orm	ed ID upon return of
Signature of Person Completing Form:			Date:	