

New Membership
 Renew Membership

COLORADO CHEROKEE CIRCLE (COCC)
NEW MEMBERSHIP and RENEWAL FORM

2019



Membership dues are \$25.00 for household annually. In addition to voting privileges for adult members, annual dues entitle each household to receive email notices, newsletters, and the membership directory.

Membership Directory Please check box **Yes** or **No** adjacent to the information you authorize to be listed in the COCC Membership Directory. Names of children under the age of 18 will not be printed. The directory is for COCC members only and will not to be used for marketing purposes.

Directory*

*** Primary Member Information***

Yes No

Name (Please Print) _____ Date _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Phone (_____) _____
 Mobile (_____) _____ Other _____
 Email _____

Cherokee Affiliations - Please check any that apply:

Cherokee Nation ___ United Keetoowah Band ___ Eastern Band Cherokee ___ Unregistered Cherokee Descent ___
 Other _____ Note: You do not have to be a member of any tribe to join the COCC Circle family.

Please ***List ALL household members** starting with you/primary. Check each name to be listed in the Members Directory. Check **No** box for children under the age of 18... please note the "Under 18" box and mark accordingly. Thank you.

Directory*		Name(s) (First and Last)	Veteran		Under 18?		Birth		Registry # (if applicable)
Yes	No		Yes	No	Yes	No	Month	Year	
<input type="checkbox"/>	<input type="checkbox"/>	(You)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			#
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			#
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			#
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<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			#

***Photo Release:** COCC has permission to use household member's photos in newsletter or directory? **Yes** ___ **No** ___
 Yes with exception to _____; I do not release use of photo.
 (Please list all household persons names you do not want COCC to use photo in the monthly newsletter or annual directory)

Please make checks payable to: **COCC** or ***Colorado Cherokee Circle**. Please DO NOT send cash.
 Mail to: COCC / Memberships PO Box 40292 Denver, Colorado 80204-0292

*Primary Member Signature _____ Date _____

COCC meets the 3rd Saturday each month; however this may vary due to holidays, visits from the Cherokee Nation, location availability, tour date availability. Meeting updates and reminders will be sent via email notification prior to the meeting date. Please inquire for wheelchair access or handicap accommodation information for facilities if needed.

**Please continue on the back side....*

Contact and Information: Facebook Colorado Cherokee Circle and www.cocherokeecircle.org

Business Listing: "Free" for your private business in the directory. Listings are for our members only who choose to connect with and to support our Cherokee community. Note: COCC does not endorse any business. Council's approval is required for the business to be listed. Please include Company Name, Address, Phone, Email, Website information as you would like it to appear: _____

Advertising Opportunity The cost of a business card size advertisement is \$25.00. Please provide a high resolution JPG file along with payment. The above member signature authorizes print approval. Advertising funds are considered a fundraiser donation and will go into the general COCC account to offset printing and mailing costs of the Directory.

QUESTIONNAIRE

COCC is **very interested in you...** your interests, native knowledge, past ancestry, talents, craft, other.

* Please list any topic you are interested to learn more about. Example: Language, Lineage, History...other

Do you have a meeting presentation idea that you would like to see? _____
Please explain _____

Would you be willing to give a presentation at a meeting? _____
Please explain _____

Would you be interested in serving on one of our committees? Please check interest _____
Newsletter ___ Fundraising ___ Social/Hospitality ___ Membership ___ Youth/Children's Activities ___
Are there other ways that you'd like to help or special talents you'd like to share? _____
Please explain _____

COCC **college scholarship fund** for members. If you would like to donate to the fund please include a separate check made to: **Colorado Cherokee Circle** and write in the memo "Scholarship Fund Donation".

Wado! (Thank you!)

Please do not write below this line. Thank you

%%%%%%%%%%
Date Application Received _____ Date Reviewed _____ Date Accepted-Voted _____
Annual Dues Received Date _____ Amount \$ _____ Check # _____ Cash _____
Declined-Statement _____

Wado! (Thank You) for your application.