



**The Klamath Tribes
Member Benefits Department**
501 Chiloquin Boulevard
PO BOX 436
Chiloquin, OR 97624
memberbenefits@klamathtribes.com
Phone: (541) 783-2219 | Fax: (541) 783-7768
Authorization to Release Information

Enrollment Ordinance §4.04, Confidentiality

Enrollment documents are confidential unless release is authorized by the applicant or his/her legal guardian.

Member's Information

Office Use Only

- 1. Full Legal Name: _____
 Last First Middle Suffix (Sr., Jr., III)
- 2. Other Known Name (eg. Maiden, Indian): _____
- 3. Date of Birth: _____ Social Security Number: _____ Roll #: _____
- 4. If this application is being submitted on behalf of a minor or adult under guardianship, provide the following information for the person submitting this application:
 Name: _____ Relationship to Applicant: _____
 Mailing Address: _____
 Street City State Zip
 Primary Phone: _____ E-Mail Address: _____
- 5. The enrollment record information to be released include(s) the following:

- 6. The purpose for this release of information:

- 7. The enrollment record information will be release by:
 The Klamath Tribes Member Benefits Department
 501 Chiloquin Boulevard, PO BOX 436, Chiloquin, OR 97624
- 8. The enrollment record information will be released to:
 Name of Organization: _____
 Name of Person(s): _____
 Mailing Address: _____
 Street City State Zip
 Email Address: _____
 Primary Phone: _____ Fax: _____
- 9. The record information should be sent by: Email Postal Mail Fax In-Person

I, _____, hereby voluntarily authorize the release of the above listed information from my enrollment record. I understand this will be a one-time release for the document(s) listed above.

10. Signature: _____ Date: _____

Signed by: Applicant Legal Guardian of Minor* Legal Guardian of Adult*

*Must ensure legal documentation showing guardianship is on file.

Klamath Tribes Member Benefit's Office Use Only

Date Received: _____ MB Staff Initials: _____ Member's Roll # _____
Date Record Information Released: _____ Guardian's Legal Doc. on file: _____

This document was prepared under the provision of the Enrollment Ordinance Klamath Tribal Code Title 1 Chapter 4, approved February 23, 2008 by General Council, Revised September 26, 2013.