Tāp Pīlam Coahuiltecan Nation

Application Form

(Check and Sign number 1 or number 2)

☐  1. I hereby affirm that I am a Coahuiltecan and I wish to be so recognized by the Tāp Pīlam Coahuiltecan Nation.

__________________________________
Signature

☐  1. I hereby affirm that I am a Native American; I hereby affirm that I place my Indian citizenship with the Tāp Pīlam Coahuiltecan Nation; and I affirm that I wish to be so recognized by the Tāp Pīlam Coahuiltecan Nation; and I affirm that I wish to be recognized as a member by the Tāp Pīlam Coahuiltecan Nation according to the customs of the Nation.

__________________________________
Signature
Instructions for Application

Your statement can be as brief as a one-line sentence such as: I am a Coahuiltecan” or I am descendant of Coahuiltecan Ancestors. It is recommended that you fully describe your Indian heritage and your Indian ancestors by name and include such information as tribal affiliation, how you know they were Indian, their dates of birth, marriage, and death, where they lived, and other relevant information. You are encouraged to attach a family tree and other documents relating to the Indian identity of family members. Oral tradition is fully acceptable in determining Indian Identity under federal law.

Your information will not ordinarily be challenged but will be accepted. The membership committee has the right to require strict genealogical evidence, but each person is the best judge of his/her ancestry. Please state if you wish your information to be kept confidential.

The Tribe is known as the Tāp Pīlam Coahuiltecan Nation and recognizes all the Coahuiltecan bands of Coahuila and Texas as members of our Nation. Members are encouraged to identify with one or more of these bands in order to work to preserve the History and Cultural traditions of the Bands of our Mission Pueblos.

Your Statement should specify your qualifications to become a tribal member. Membership in the Tāp Pīlam Coahuiltecan Nation is granted only by the Nation. You can be a citizen of the United States or of Mexico and also be a citizen of the Coahuiltecan Nation. Please state whether or not you are a member of other Tribal organizations. State if you are a member of an Indian Tribe. Normally you can only be a member of one tribe. Your application to the Nation may be made entirely by verbal means. Oral histories and testimony of oral tradition to the Nation are fully acceptable.
Membership Criteria

Check under which one you are applying.

- Member of Mission communities and descendant of the Mission Indians.
- Descendant of Coahuiltecan ancestors and origination in the traditional lands of the Coahuiltecan peoples.
- Native American descended from one or more Nations who were represented at the missions but are not Coahuiltecan. (A Nation adopted by the mission communities which were Coahuiltecan.)
- Native American who has worked for the reestablishment of the Coahuiltecan Nation. (Requires adoption by the Tribal Council.)
- Spouse or stepchild of a member of the Coahuiltecan Nation. (Requires adoption by the Tribal Council.)
- Honorary Membership
- Child born to a member of the Coahuiltecan Nation.
Personal Information

Name: _____________________________________________________________________________
   First       Middle       Maiden       Last

Address: ____________________________________________________________________________
         Number & Street
         City, State, Zip code

Phone: ______________________________________________________________________________
       Home       Work       Cell

Date of Birth: _______________________________________

Place of Birth: ________________________________________________________________________
                City       State       Country

I am a member of the following Native American organizations:

Names: ______________________________________________________________________________
       ______________________________________________________________________________
       ______________________________________________________________________________
       ______________________________________________________________________________
       ______________________________________________________________________________
Personal History
Native American Heritage

Did your Parents or grandparents or relatives talk about having Indian Ancestry?

☐ Yes

☐ No

What are the family stories or legends about having Indian Ancestry?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
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Original document adopted by Tribal Council 1995
Revised May 20, 2016
**Native American Ancestry**

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<thead>
<tr>
<th>Name:</th>
<th>Relationship:</th>
<th>Tribe:</th>
<th>Band:</th>
<th>Clan:</th>
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(attach additional names on separate sheet if necessary)
Missions/Pueblos

Did your Native American ancestors reside at the Missions/Pueblos of Texas and or North Eastern Mexico?

○ Yes

○ No

If yes, which Mission/s?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

List members of your family which were born at the missions.

Name: _______________________________________________________________________________

Relationship: _________________________________________________________________________

Date: _______________________________________________________________________________

Inclusive dates you lived at the missions.

_____________________________________________________________________________________
I hereby request that I be placed on the Tribal Roll of the Tāp Pīlам Coahuiltecan Nation. I have met the qualifications for inclusion according to the provisions of the Constitution of the Tāp Pīlам Coahuiltecan Nation.

_____________________________
Signature

THE STATE OF TEXAS
COUNTY OF BEXAR

Before me, a Notary Public, on this day personally appeared ___________________________, known to me to be the person whose name is subscribed to the foregoing document, and, being first duly sworn, declared that the statements therein contained are true and correct.

Given under my hand and seal of office this ________________ day of _____________________, 2018.

_____________________________
Notary Public, State of Texas

_____________________________
Typed or Printed Name of Notary

My Commission Expires ________________