



The Confederated Tribes of the Grand Ronde Community of Oregon

Enrollment/Vital Statistics
9615 Grand Ronde Road
Grand Ronde, Oregon 97347

Phone (503) 879-2116
1-800-422-0232 x 2116
Fax (503) 879-2480

NAME CHANGE REQUIREMENTS

1. Legal documentation of the name change must be included in the member's file. A Social Security card reflecting the new name is recommended. If you cannot provide a copy of the Social Security card, a completed W-9 form will work in lieu of the Social Security card. In addition, one of the following documents will be necessary to present:
 - Birth Certificate
 - Marriage Certificate
 - Divorce Decree
 - Adoption Decree
 - Current state Issued ID Card or Driver's License
 - Court Issued Document
2. If the tribal member is under the age of 18, or incompetent, a legal guardian may file for a name change, providing the required documentations list above.
3. The Enrollment Staff shall make a correction to the official membership roll.

If you require further information, you may contact one of our enrollment staff for assistance at 1-800-422-0232 ext. 2116.



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NAME CHANGE FORM

Enrollment Number: _____

Current Name:

Last: _____ First: _____ Middle: _____

New Name:

Last: _____ First: _____ Middle: _____

Required is a copy of SS card or W9 form with **new** name and a copy of one of the following:

____ Birth Certificate ____ Marriage Certificate

____ Divorce Decree ____ Adoption Decree

____ Current State Issued DL or ID ____ Court Issued Document

Member Signature: _____ Date: _____