

COMANCHE NATION ENROLLMENT  
P.O. BOX 908  
LAWTON, OK 73502-0908

CHANGE OF ADDRESS

Name: \_\_\_\_\_ Roll No. \_\_\_\_\_

Maiden or other names used: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_