



CONFEDERATED TRIBES
of the GOSHUTE RESERVATION

195 Tribal Center Road
HC 61, Box 6104
Ibapah, Utah 84034
435-234-1138 (office)

**Custody and Address Verification Form for Minor Tribal
Members**

Use of this form is for the release of monies entitled to the minor from the Tribe's annual funds distribution. Only the primary provider with legal authority can complete this form for the minor child. **All legal custodians and/or legal guardians must submit proper paperwork proving legal custody over the below named minor.** If you have more than one child, please complete one form in its entirety for each child.

Child's Full Name: _____ Birthdate: _____ Enrollment No. _____ Social Security No. _____ Your Relationship to Minor: _____

Male ☐ Female ☐ Home Phone No. _____ Mobile/Other No. _____

Father's Name: _____ Mother's Name: _____

Current address for child, parent, and/or guardian will reflect on the check

Full Name of Parent or Legal Guardian: _____

Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Individuals applying for Minor Funds are required to read and sign the following statement:

1. I am the legal custodial parent or legal guardian of the above named minor.
2. All information contained herein is true and accurate.
3. I understand that this money is for the benefit of the minor will be used accordingly.
4. **I agree to be subject to the laws of the Confederated Tribes of the Goshute Reservation and/or applicable federal law if there are any legal claims or causes of action against me as a result of accepting money for the above-named minor.**
5. If I misuse this money, or if I am not the legal custodial parent or guardian, I will be subject to civil and/or criminal prosecution by the proper law enforcement agency.
6. The documents that I am providing as proof of my legal custody or legal guardianship of the above-named minor are current and binding; and true and accurate copies.
7. I am signing the statement voluntarily and swearing to the truth and veracity of all statements herein.

Date: _____

Signature: _____

Relationship to Minor: _____

On this _____ day of _____, 2026,
I certify that the signer of the foregoing
instrument, personally appeared before me,
produced satisfactory identification and while
under oath or affirmation, voluntarily signed
this document and acknowledged to me that
he/she executed the same.

(Notary Seal)

Notary Signature

Printed Name

State: _____ Expiration: _____