

# CHEROKEE

## GWY



# PHOENIX

## JSAHOA

### CHEROKEE PHOENIX NEWSPAPER SUBSCRIPTION REQUEST

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone : \_\_\_\_\_ email: \_\_\_\_\_

Please provide the following subscriber information *(for statistical purposes only)*:

Cherokee Nation Citizen: Yes  No  Not Sure (gift subscription)

If Yes, please provide Cherokee Nation Registry #: \_\_\_\_\_

Veteran of U.S. Armed Forces: Yes  No  Senior Citizen (age 65 and over) Yes  No  Date of Birth: \_\_\_\_\_

Is this subscription a gift for another party? Yes  No

If Yes, please provide contact information for the subscription purchaser:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ email: \_\_\_\_\_

When gift subscription expires, send renewal to: Giver  Recipient

#### SUBSCRIPTION DETAILS

YES, I would like to subscribe to the Cherokee Phoenix:

- 1 Year Subscription (12 issues + Cherokee National Holiday Guide) **\$10.00**
- 2 Year Subscription (24 Issues + 2 Cherokee National Holiday Guides) **\$18.00**
- 3 Year Subscription (36 Issues + 3 Cherokee National Holiday Guides) **\$26.00**

#### PAYMENT DETAILS

I have enclosed a check/money order in the amount of \$ \_\_\_\_\_ made payable to 'Cherokee Phoenix'

Please charge my credit card  VISA  MASTERCARD

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder's Name (please print): \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*All subscriptions are binding for the term selected. The Cherokee Phoenix will not issue refunds for cancelled subscriptions\**

*\*\*The Cherokee Phoenix does not accept cash. We apologize for any inconvenience.\*\**

**Please return this form along with your payment to:**

**Cherokee Phoenix Subscriptions**

**P.O. Box 948**

**Tahlequah, OK 74464**

If paying by credit card you may fax or scan and email this form to:

Fax: 918.207.0049

email: [joy-rollice@cherokee.org](mailto:joy-rollice@cherokee.org)

*For questions or assistance please contact us at:  
Phone 918.453.5269 or email [joy-rollice@cherokee.org](mailto:joy-rollice@cherokee.org)*

#### OFFICE USE ONLY

Received: \_\_\_\_\_ Recvd by: \_\_\_\_\_

New Subscription  Renewal

Paid by: Check  Credit Card  M.O.

If Check or M.O.:

Check # \_\_\_\_\_

M.O. #: \_\_\_\_\_