

## **NATIONALIZATION FORM**

Nationalization with the Moorish Republic is open and FREE to any melanated person whose U.S. issued birth certificate lists them as negro, black, colored, or african-american.

To nationalize with the Moorish Republic, all forms must be filled out and signed in wet ink. Please download the nationalization form and complete the following steps. **Please write legibly. Illegible forms will be rejected.**

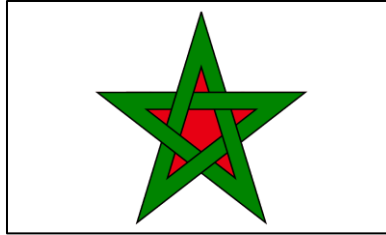
1. Fill out the following form and sign the name that you intend to use, if you intend on changing your name.
2. Stick the barcode portion of a certified mail receipt to the back of the declaration form. Separate and keep the receipt portion. The number becomes your I.D. number with the Moorish Republic and will be on your I.D. card.
3. A declaration must be mailed for everyone in the household who wishes to join the Moorish Republic. This also applies to the children.
4. For verification and location purposes only, we request that you send a photo copy of the front of your U.S. issued I.D. card or U.S. issued birth certificate with all account numbers redacted.
5. Mail the form to the following address:

The Moorish Republic

P.O. Box 88062

Indianapolis, Indiana 46208

**The Moorish Republic does not use or require the use of any numbers on your U.S. birth certificate. It is only used for identification and statistical purposes. Send copies of only the front of the birth certificate. And we encourage you to somehow cover the numbers. Please do not send an original birth certificate. DO NOT GET RID OF YOUR U.S. BIRTH CERTIFICATE!!!! IT WILL BE USEFUL LATER. \$\$\$**



## **Declaration of Moorish Republic Nationality**

I, \_\_\_\_\_, am a National of the Moorish Republic. My National Flag is the Moorish Republic Flag. My Constitution is the Moorish Republic Constitution. My Territory consists of the same North American territory occupied by the several United States of America and District of Columbia. The capitol of the Moorish Republic Nation is located in the city of Indianapolis, in the Indiana Province.

**So Let It Be Written, So Let It Be Done**

I Am: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

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

Province/State: \_\_\_\_\_

City or County: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_