



Harvest Land

Office Address 102 Midland St.

Pawhuska, OK 74056

PH (918) 287-5333

EMAIL harvestland@osagenation-nsn.gov

SEASONED FIREWOOD APPLICATION

Dear Seasoned Firewood Applicant:

The Office of the Principal Chief, through Harvest Land Farm, has firewood for distribution to Osage citizens. The firewood assists in continuing Osage traditional customs. It is available for pick-up only and will be provided to the following:

- Bereaved Osage families for memorial dinners (Head Cook may apply for one rick).
- Y ALQAVKA Dance Committees (Drum Keeper or Head Cook may apply for five ricks).
- Family camps during Y ALQAVKA (Any family member may apply for one rick per camp).
- Osage Native American Church meetings (Head Cook may apply for one-half rick).
- Naming Ceremonies (Parents of child being named, person being named, or Head Cook may apply for one rick).
- Osage Nation sponsored events (Department Director or his/her designee may apply for one rick).

Completed applications must be received at least three weeks prior to event except in the case of applications made by bereaved Osage families. Bereaved families may call Dawn Wormington at (417) 317-6303 for after-hours service. All requests are subject to the availability of seasoned firewood at Harvest Land Farm each year.

Sincerely,

Jann Hayman, PhD
Director



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POINT OF CONTACT		
Last Name:	First Name:	Phone:

REQUEST INFORMATION (please check one)		
<input type="checkbox"/>	Bereaved	Deceased Osage Citizen:
<input type="checkbox"/>	Y ALQAVKA District	District:
<input type="checkbox"/>	Y ALQAVKA Family Camp	Family Camp Name:
<input type="checkbox"/>	Osage Native American Church	Chapter Name:
<input type="checkbox"/>	Naming Ceremony	Person being named:
<input type="checkbox"/>	Osage Nation sponsored event:	Department/Program:
<input type="checkbox"/>	Would you like produce in season for your event?	

Date of event: _____

Applicant Signature

Date

FOR OFFICE USE ONLY

_____ Approved

_____ Denied

Number of ricks: _____

Pick-up Date and Time: _____

Notes: _____

SFA # _____



Date Stamp

Received by: _____