

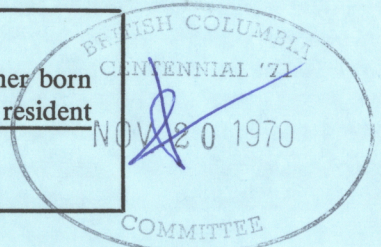


APPLICATION FOR THE PIONEER MEDALLION

ELIGIBILITY

For purposes of this award, a Pioneer shall be any person who was either born in Canada or a resident of Canada prior to January 1, 1897, but must be a resident of British Columbia NOW.

Award to be made during 1971.



PLEASE PRINT OR TYPE

1. Name in full ~~Mr.~~ Mrs. FRIESEN AGANETHA
(Family name.) (Given names.)

2. Date of birth 18 April 1896 3. Place of birth Newenberg, Manitoba
(Day.) (Month.) (Year.)

4. Maiden name PETERS
 If married Widow

5. Husband's given names ABRAHAM F. FRIESEN

6. Wife's full maiden name AGANETHA PETERS

7. Occupation before retirement Housewife and mother

8. If born in Canada but outside British Columbia—
 (a) When did you first come to British Columbia June 1943
(Day.) (Month.) (Year.)
 (b) Where did you first live in British Columbia Vanderhoof
 (c) Where did you live immediately before coming to British Columbia Morden Man.

9. If born outside Canada—
 (a) Where did you live immediately before coming to Canada _____
 (b) When did you first come to Canada _____
(Day.) (Month.) (Year.)
 (c) Where did you first live in Canada _____
 (d) When did you first come to British Columbia June 1943
(Day.) (Month.) (Year.)

10. Names of parents in full, including maiden name of mother—
 Father PETERS HERMAN
(Family name.) (Given names.)
 Mother BUSHMAN KATHARINA
(Maiden name.) (Given names.)

11. Given names of brothers or sisters Katharina, Helena, Sarah, Wilhelm, Maria, Agatha, Johan, Herman, Anna, Jacob, Susanna, David.

12. Any remarks you may care to make about your family background or experiences (if required, please attach separate sheet) _____

13. Box 98 Mrs Aganetha Friesen.
(Present address of applicant.) (Signature of applicant.)
Vanderhoof, B.C. Oct, 28, 1970, 1970.
(Date.)

RETURN THIS FORM IN QUADRUPPLICATE TO YOUR LOCAL CENTENNIAL COMMITTEE FOR FORWARDING TO VICTORIA. NO FORMS WILL BE ACCEPTED AFTER NOVEMBER 19, 1970.

To be completed by the local Centennial Committee

14. [Signature] VANDERHOOF
(Signature of local Centennial Committee Chairman.) (Name of local Centennial Committee.)

15. What, if any, verification of date of birth was available Birth Certificate