



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 <sup>Mr.</sup> ~~Mrs.~~ ~~Miss~~ THAMES OSCAR WILLIGEN  
(Family name.) (Given names.)

2. Date of birth 10 6 1887 3. Place of birth hain Hanaimo U.S. BC  
(Day.) (Month.) (Year.)

If married—  
 4. Maiden name \_\_\_\_\_

5. Husband's given names Oscar W Thames

6. Wife's full maiden name Elizabeth F Elliott

7. Occupation before retirement Logger

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

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 \_\_\_\_\_  
(Day.) (Month.) (Year.)

10. Names of parents in full, including maiden name of mother—  
 Father \_\_\_\_\_  
(Family name.) (Given names.)  
 Mother \_\_\_\_\_  
(Maiden name.) (Given names.)

11. Given names of brothers or sisters \_\_\_\_\_

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

13. Bowser - B.C. O W Thames  
(Present address of applicant.) (Signature of applicant.)  
August 16<sup>th</sup>, 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. John W Manley Qualicum Bay Centennial '71  
(Signature of local Centennial Committee Chairman.) (Name of local Centennial Committee.)

15. What, if any, verification of date of birth was available First World War Discharge Papers