

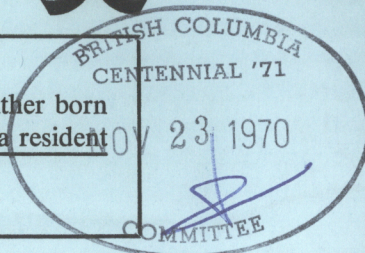


APPLICATION FOR THE PIONEER MEDALLION

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 Miss Klassen Elizabeth
(Family name.) (Given names.)
- 2. Date of birth 7th Apr 1886 3. Place of birth Winkler, Manitoba
(Day.) (Month.) (Year.)
- 4. Maiden name Sawatzky
- 5. Husband's given names Martin H.
- 6. Wife's full maiden name _____
- 7. Occupation before retirement _____
- 8. If born in Canada but outside British Columbia—
 - (a) When did you first come to British Columbia 23 July 1940
(Day.) (Month.) (Year.)
 - (b) Where did you first live in British Columbia Mission B.C.
 - (c) Where did you live immediately before coming to British Columbia Herbert, Sask.
- 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 Sawatzky Frank
(Family name.) (Given names.)
 - Mother Gintey ?
(Maiden name.) (Given names.)
- 11. Given names of brothers or sisters Isaac Sawatzky, Tina and Mary.
- 12. Any remarks you may care to make about your family background or experiences (if required, please attach separate sheet) _____

13. Tabor Home
31944 Sunrise Crescent Arny Klassen daughter in law
 (Present address of applicant.) (Signature of applicant.)
Clearbrook B.C. November 12, 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.

14. [Signature] M.S.A. Kelowna
 (Signature of local Centennial Committee Chairman.) Chilliwack & District 71 Committee
 (Name of local Centennial Committee.)

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