

APPLICATION FOR THE PIONEER MEDALLION



CENTENNIAL '71

JUL 1 3 1971

COMMITTEE

1971

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.

	Mr. PLEASE PRINT OR TYPE		
1.	Name in full Miss SIBLEY JAMES		
	Date of birth 7 FEB. 1882 3. Place of birth NEWMARKETONTARIO (Given names.) (Given names.) (Given names.)		
4.	If married— Maiden name		
5.	Husband's given names		
6.	Wife's full maiden name MAUD MCLEOD		
7.	Occupation before retirement FIREMAN		
8.	If born in Canada but outside British Columbia— (a) When did you first come to British Columbia (b) Where did you first live in British Columbia (b) Where did you first live in British Columbia (c) Cay.) (Month.) (Year.)		
(b) Where did you first live in British Columbia PARKS VILLE			
	(c) Where did you live immediately before coming to British Columbia		
	ST. BULE, SASKATCHEWAN		
9.	9. If born outside Canada— (a) Where did you live immediately before coming to Canada——————————————————————————————————		
	(b) When did you first come to Canada (Month.) (Year.)		
	(c) Where did you first live in Canada		
	(d) When did you first come to British Columbia (Month.) (Year.)		
10. Names of parents in full, including maiden name of mother—			
	Father SIBLEY JOHN		
	Mother (Family name.) (Given names.) MARY		
	(Maiden name.) (Given names.)		
1.	Given names of brothers or sisters BROTHER: JOHN SIBLEY		
	SISTER: MARY EPSWORTH		
12.	2. Any remarks you may care to make about your family background or experiences (if required, please		
	attach separate sheet)		
13.	Hg- Park View Trailer Court Source Diblos (Signature of applicant.) Parksville Bb. TULY 9 1971, 1970.		
	Varksville Bb. JULY 9 1971, 1970.		

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

To be completed by the local Cent	tennial Committee
14 Clerkeller	PARKSVILLE
(Signature of local Centennial Committee Chairman,)	(Name of local Centennial Committee.)
15. What, if any, verification of date of birth was available	ARKY RECORDS

20M sets-370-2381 (8)

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