



1971
BRITISH COLUMBIA
CENTENNIAL '71
NOV 23 1970
COMMITTEE

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

- Mr. Mrs. ✓ Miss MOORE (Family name.) MABEL (Given names.)
1. Name in full
2. Date of birth 12 MARCH 1885 (Day.) (Month.) (Year.) 3. Place of birth NORTH DAKOTA.
- If married—
4. Maiden name KNOX, MABEL
5. Husband's given names George ALEXANDER
6. Wife's full maiden name _____
7. Occupation before retirement HOUSEWIFE
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 NORTH DAKOTA.
- (b) When did you first come to Canada _____ (Day.) (Month.) (Year.) 1890
- (c) Where did you first live in Canada COMOX V.I. B.C.
- (d) When did you first come to British Columbia _____ (Day.) (Month.) (Year.) 1890
10. Names of parents in full, including maiden name of mother—
- Father KNOX (Family name.) JOHN (Given names.)
- Mother WATSON (Maiden name.) REBECCA (Given names.)
11. Given names of brothers or sisters ANNIE, KATIE, MINNIE, ETHEL
LOTTIE, JEAN
12. Any remarks you may care to make about your family background or experiences (if required, please attach separate sheet) _____
13. P.P.2 Quakwam Beach. (Present address of applicant.) Mabel Moore (Signature of applicant.)
November 18th, 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. AP Gillen (Signature of local Centennial Committee Chairman.) Coomes Hillers (Name of local Centennial Committee.)

15. What, if any, verification of date of birth was available BIRTH CERTIFICATE