



Trails of our Ancestors 2014 Application & Waiver Form

Participant information (Please fill out the section below):

Applicant's Name:		Address:		Community:
D.O.B: (M/D/Y)	SIN #:	Home Phone #:	Work Phone #:	Are you Tłichq Citizen?
				Yes <input type="checkbox"/> No <input type="checkbox"/>

Travel Information:

Departure From:	Travel Date:	Arrival Location:	Arrival Date:
Behchoko	Wednesday, July 2 nd , 2014	Whatì	Friday, July 7 th , 2014
Are you interested traveling back to your community with a canoe?			Yes <input type="checkbox"/> No <input type="checkbox"/>

Trails Of Our Ancestor Management by;	Language, Culture and Communication
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Comments:

Please explain why you are interested in the canoe journey? Have you participated in the Tłichq Ancestor Canoe Trails in the past? If yes, how many times did you participate in the canoe journey?

Notices

- Alcohol and, or drugs will NOT be tolerated on the Canoe Journey. If A&D is abused, participants will be dismissed as result of your action under the Tłichq Government policy.
- All participants must obey rules set forth by our elders and foremen on the Canoe Journey.
- Respect our environment and one another.
- Have fun.

Applicant's Signature:

Print Name:	Signature:	Date:

Tłichq Government used only

Approved By: _____

Date: _____