



Pasqua FIRST NATION

OFFICIAL APPLICATION

First Name: _____ Last Name: _____

Date of Birth: _____ Age: _____ Dancing Category: _____

Address: _____

Phone Number: _____

Email address: _____

Mothers Full Name: _____

Fathers Full Name: _____

Guardian(s) Full Name: _____

PHOTO RELEASE

I give Pasqua First Nation Pow Wow Committee my permission to use the information from my essay for an article that will appear in the Pasqua First Nation Newsletter, website or on social media sites. If crowned Miss Pasqua First Nation Senior Princess, I give Pasqua First Nation Pow Wow Committee permission to take a photo of my immediate family and myself after I am crowned. I understand that photos of me as Miss Pasqua First Nation Senior Princess may be selected for use in other publications related to Pasqua First Nation, the annual Pasqua First Nation Traditional Pow Wow or other newspapers.

Applicants Signature: _____ Date: _____

Applicants Printed Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Printed Name: _____

Submit complete application to: ***Pasqua FN Pow Wow Committee***
PO Box 79
Pasqua First Nation, SK. S0G 5M0
Or Fax Complete Applications to: (306) 332-5199