



BABY'S FULL NAME:

BABY INFO:

On Reserve

Off Reserve

- DOB: _____
- Clan: _____ Spirit Name _____
Dakelth Name _____
- Phone#: _____
- Mailing Address: _____

PARENTS:

- Parents: _____
- Siblings: _____
- Grandparents: _____

CONTACT INFO: BINCHE WHUTEN HEALTH DEPARTMENT.

Binche Whut'en would like to invite you to our very first annual baby welcoming ceremony.

CONSENT FORMS.

I, _____ do wish to have my child _____
to participate in Binche Whut'en's first baby welcoming ceremony of 2022. I
have checked that the information provided above is accurate, & to be
announced at the baby welcoming ceremony in August 2022.

Signature

Date