Schedule A.S.B. 13

Municipal District of Wainwright

100 Year Farm Family Award APPLICATION FORM *

Current Lande	vner's Name:
	First and Last Name(s)
Mailing Addre	s:
Phone Number	: (780)
Legal Land Lo	ation:/Division:
First and Last Name(s) Mailing Address:	
Year of Land	wned/ Homesteaded/ Residence Built/ Date of Entry:fic date plaque is required by (i.e. family reunion)?
Please indicate how you wish the families name/spouses/farm name to appear on the	
	(blank line)(blank line) 100 YEARS OF FAMILY FARMING ON THE ORIGINAL HOMESTEAD(land location)W4
	District of Wainwright EST(year)

Please forward the completed application form to: Municipal District of Wainwright, 717-14th Avenue, Wainwright, Alberta, T9W 1B3

Quarter section must have original homesteaded acres and not be subdivided. Remember to include a copy of the Provincial Archive documents or land title search with your application. This personal information is collected under the authority of the Freedom of Information and Protection of Privacy Act. If you have any questions, please call 780-842-4454.