



Whitecap Dakota First Nation

Annual Christmas Concert & and Christmas Gifts Program December 19, 2019

Program:

- Infants to Grade 4: All Children residing On-reserve in the Whitecap Community from Infant to Grade 4 will receive a wrapped Christmas gift from Santa at the annual Community Christmas Concert on December 19th, 2019 at the CRHES (Charles Red Hawk Elementary School).
- Grade 5 – 12 Students: All students on Whitecap Dakota First Nation's nominal roll in Grades 5 – 12 will receive a \$50 Midtown Plaza gift card. These gift cards will be distributed by Ian Worme, Student Advisory Counselor, at the Students' schools on a designated date in December.

Responsibilities:

- 1) CRHES Students and ELC Children: Staff at CRHES and ELC (Early Learning Centre) will provide list of names/genders/age. This includes coordination to ensure names do not repeat. No application by parents required.
- 2) Infants – Grade 4 Who Do Not Attend CRHES or ELC and Reside On-Reserve: Parents must apply and provide proof of residency with their application. CRHES Staff will track gift applications for “non-nominal roll” and “non-ELC” children and purchase and wrap the gifts. ***It is the responsibility of Parents of children in this category to submit an application to CRHES by December 6th, 2019 (See Attached).***
- 3) Grade 5 – 12 Students: Whitecap's Student Advisory Counselor will arrange for the purchase and distribution of Midtown Plaza Gift cards for Grade 5-12 students on nominal roll. No application by parents required.

Children from the Whitecap Community who cannot attend the Christmas Concert can have their gift picked up at the CRHES on December 20th.



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APPLICATION FORM

WDFN Christmas Gifts at Concert Program December 19, 2019

#2: INFANTS – GRADE 4; NON-CRHES OR NON-ELC; ON-RESERVE

Parent Name: _____

Address: _____

Phone #: _____ (h) _____ (c)

Child(ren)'s Name:	Age	Gender (M or F)
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

{Please attach a 2nd page if required}

Parent/Guardian Signature: _____ Date: _____

Drop this form off @ CRHES, or Email or Fax to Kim Buffalo at:

kbuffalo@whitecapdakota.com

Fax: 306-477-2606

PART 2: COMMUNITY SCHOOL COORDINATOR

One Proof of Residency Attached:

Utility Bill Current Tenancy Agreement

Date Received: _____

Community School Coordinator Signature: _____