

**KTUNAXA KINBASKET TREATY MEETING**

**October-26-15**  
**10:00 am - 3:00 pm**

Gymnasium - 220 Cranbrook St. N, Cranbrook

**REGISTRATION FORM MUST BE SUBMITTED BY October 19, 2015**Forms can be mailed to Ktunaxa Nation Council, 7825 Mission Rd, Cranbrook BC V1C 7E5,  
Faxed: 250-489-2438 or dropped off at Reception. Attn: Garna Feregotto

Name \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ Destination: KNGB (Ktunaxa Nation Government Bldg)  
 PC: \_\_\_\_\_ Phone: \_\_\_\_\_ Event Date: October 26, 2015

KM	Rate	Travel From (Round Trip)
Under 100 KM	\$25.00	Jaffray (95) Kimberley (64) Marysville (46)
Under 400 KM	\$75.00	Akisqnuq (256) Bonner's Ferry ID (264) Canal Flats (165) Elkford (354) Fernie (208) Invermere (272) Lower Kootenay - Creston (228) Radium (304) Sparwood (204) Shuswap (272) Tobacco Plains Village/Edwards Lake (192) TP Duty Free (208)
400 - 700 KM	\$125.00	Castlegar (458) Elmo, MT (556) Golden (500) Kaslo (550) Lethbridge(610) Nelson (442) Spokane (596)
Over 700 KM	\$250.00	Calgary (1056) Edmonton (1402) Kamloops (1216) Kelowna (1054) Merritt (1384) Penticton (1004) Red Deer (1052) Revelstoke (792) Salmon Arm (986) Vancouver (1704) Vernon (1088) Victoria (2060)

**Travel Maximum of \$250.00.** You must transport at least 1 additional citizen. Only 1 person per vehicle can claim mileage. Please note that carpooling is encouraged. Passenger limit waived for Elders & Nation Members traveling from outside the Territory.

**All passengers must complete registration form**

Passenger Name: \_\_\_\_\_

Passenger Name \_\_\_\_\_

**RETURN MILEAGE:**

From: \_\_\_\_\_ To: \_\_\_\_\_ Cranbrook

**RATE:** \_\_\_\_\_**HONORARIA:** 1 day(s) @ 100.00 \$ 100.00

(If you're a KNC staff please attach approved leave form)

**TOTAL EXPENSE:** \$ 100.00**NOTE: Registrants must be in attendance for the full day to receive honoraria.**

I certify these expenses were incurred on authorized business and authorize the KNC to deduct any outstanding balance from monies owing to me.	<b>GST Account # 150500-OTRE-000</b>	<b>\$ -</b>
X	<b>G/L Account # 500004-OTRE-CIT</b>	<b>\$ -</b>
<b>** Please Sign Above **</b>	<b>Honoraria Account # 510004-OTRE-CIT</b>	<b>\$ 100.00</b>

Director or Designate Approval: \_\_\_\_\_

Date: \_\_\_\_\_

(By signing this form, I verify all information to be correct.)