

Skw'one-was Family Groups



If you have **28 or fewer students, please use 4 family groups (no Wool Weaver group).
Please email with Class list, Group Profile, Medical forms, Informed Consent forms, and Group Medical Summary to odsclinic@sd44.ca **at least 2 weeks** before your group's arrival.

School: _____ Teacher: _____ Program dates: : _____

Hunters & Fishers

- Elder: _____
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____
 - 7) _____
 - 8) _____

Cedar Bark Workers

- Elder: _____
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____
 - 7) _____
 - 8) _____

Wool Weavers

- Elder: _____
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____
 - 7) _____
 - 8) _____

Wood Workers

- Elder: _____
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____
 - 7) _____
 - 8) _____

Plant Gatherers

- Elder: _____
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____
 - 7) _____
 - 8) _____

Teacher: _____

Floater: _____

EA: _____