



# Fraser Valley Aboriginal Children and Family Services Society-Xyolhemeylh



## LIFE SKILLS VIRTUAL GROUP Registration Form

**Location:** Online Using Zoom, link will be emailed to you, please include your current email address

**When:** Feb 9- 25 on Tuesdays and Thursdays 6:00-7:30pm

### Participant Information

NAME (FIRST AND LAST):		PHONE NUMBER:	AGE:
Email Address:		CITY:	
ABORIGINAL STATUS:			
<input type="checkbox"/> Status	<input type="checkbox"/> Non-Status	<input type="checkbox"/> Métis	<input type="checkbox"/> Other
		<input type="checkbox"/> On Reserve	<input type="checkbox"/> Off Reserve
Additional info or behaviours Facilitator or Staff should be aware of:			

**What other Life Skills or Activities are you interested in learning more about:**

**Would you like us to send you emails of upcoming groups or activities?**

Yes, Keep me updated

No, not at this time

**Registrations to be sent to Raven Little**  
**, Child and Youth Mentor, [Raven.Little@Xyolhemeylh.bc.ca](mailto:Raven.Little@Xyolhemeylh.bc.ca)**



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