

## LET - Parliamentary Procedure (October 19 - 20, 2019, Sydney)

First name:

Last name:

Email: ☐ Personal ☐ Work ☐ Local Union

Phone number: ☐ Work ☐ Home ☐ Cell ☐ Local Union

Local number OR other CUPE affiliation (division, council, etc)

**Enter in an address to send correspondence to, or if left blank we will send to the local address.**

Address:

City:

Province:

Postal code:

☐ Home ☐ Work ☐ Union Office

Send certificate by: ☐ Email ☐ Paper

I require accessibility support around: ☐ Mobility ☐ Visual ☐ Audio ☐ Other

Cancellation information: Please note that this workshop may be cancelled due to low registration or other reasons.

Send your cancellation request in writing with your local number, address and telephone number by the registration deadline to:

Please send this registration form to:

Jessica Scott

271 Brownlow Ave.

DARTMOUTH, Nova Scotia, B3B 1W6