

CUPE SK EVENT TRAILER BOOKING REQUEST FORM

DATE OF EVENT: _____

EVENT: _____

LOCAL OR ORGANIZATION HOSTING EVENT: _____

LOCATION: _____

City / town: _____

EVENT TIMES (duration and agenda) _____

BOOKING FOR: TENT **Minimum of three (3) volunteers from hosting local / organization required to be on hand for set-up and tear-down of tent.*

BBQ *If YES to BBQ, who will supply the food, drinks, and dinnerware?* _____

KEY EVENT VOLUNTEER CONTACT(S)

Name: _____

Email: _____

Phone: _____ *Cell phone for day of event contact: _____

Name: _____

Email: _____

Phone: _____ *Cell phone for day of event contact: _____

SET-UP DETAILS	TEAR DOWN DETAILS

OTHER EVENT NOTES:

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Return completed form to:
Attention: Nathan Markwart, Executive Assistant
CUPE Saskatchewan
3725 E Eastgate Drive, Regina SK S4Z 1A5