



GIMLI

MANITOBA

MNU 2010 Labour School Gimli September 20-22, 2010

Name			Gender M ___ F ___
Address:			
Phone:			
Executive Position:			
Region:			
Local/WS #:			
Choices of Program	First:	Second:	

ALLERGIES

I will be carpooling with: MEMBERS REQUIRED TO TRAVEL FROM ELSEWHERE IN THE PROVINCE WILL HAVE TRAVEL COSTS PAID AS PER MNU POLICY, USING CAR-POOLS.

Accommodations - All accommodations are based on **double/triple/quad** occupancy. If you have no preferred roommate one will be assigned to you. On rare occasions it may be necessary to room with a person not from your local/worksite, if you are **not prepared to share a room with a new friend** please indicate so and **your spot will be re-assigned** to someone else.



Preferred Roommates _____
ALL ROOMS AND BALCONIES ARE NON-SMOKING.

FUNDED: CHECK ONLY ONE BELOW  **MUST HAVE SIGNATURE OF PRESIDENT**

Provincial Funded <input type="checkbox"/>	Worksite Funded <input type="checkbox"/>	Regional Funded <input type="checkbox"/>	Self Funded <input type="checkbox"/>
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*** Signature of Worksite/Regional President:** _____

*****Without authorizing signature this application WILL be REJECTED and another applicant will be considered for this space*****

Board Development Funds

If I cannot secure a funded spot I wish to be considered on a self-funded basis.

*****I have read and understood the financial policies associated with this program*****

Name _____ Date _____