



CUPE NOVA SCOTIA VAN BOOKING FORM

PART ONE: Information Pertaining to the Local booking the van:

1. Local Name and Number:

2. Person Responsible for the Pickup and Return of the Van:

Name: _____

Complete Mailing Address:

Telephone/Cell Number:

3. Pick up and Drop off Dates for Van:

PART TWO: Date and Event Description for the use of the Van by the local:

PART THREE: Please complete this form and email it with a copy of the person driving the van driver's license to Dianne Frittenburg, Vice President CUPE NS at dfritt@icloud.com.

I certify that the foregoing information is complete to the best of my knowledge and commit complying with the CUPE NS Van policy.

Signature: _____ Date: _____
