

CUPE NOVA SCOTIA VAN BOOKING FORM

PART ONE: Information Pertaining to the Local booking 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.	1. Local Name and Number:
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.	2. Person Responsible for the Pickup and Return of the Van:
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.	Name:
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