ALBERTA – NWT COMMAND SPORTS

HOST BRANCH INFORMATION SHEET

To be returned to the Command Office
office@abnwtlegion.com by:
FALL COUNCIL MEETING

Please Print:

Command Sport: _____

Date of Event: _____

Branch Name and Number: _____

Street Address: _____

_____

_____

Contact Name: _____

Phone # _____

E-Mail: _____

TIME: **Registration:** _____

Opening **Ceremonies:** **As per set in the Alberta-NWT Sports Manual**

REGISTRATION FEE: $45.00 per person

Please include with this sheet:

Map of immediate area and highlight: **Branch**

Hotels

Cost of Guests Lunch: $ _____

Cost of Guest's Banquet: $ _____