

Name (First/Last):

## PSAC North 8th Regional Triennial Convention June 5-7, 2020 – Whitehorse, Yukon

PSAC ID#

## **CREDENTIAL FORM**

Address:		
Phone#	(work)	(cell/home)
Email (personal):		
Local:	Component:	
CERTIFICATION		
Regional Executive Vice-	pleted by the Local President, Component O President, who is certifying that the above-n a Delegate / Alternate to Convention.	•
PLEASE NOTE – You can Certification.	not sign your own form and must have an a	uthorized officer complete your
Name of Certifying Offic	er:	
Position Held by Certifyi	ng Officer:	
Local, Committee, Comp	oonent the Delegate / Alternate represents:	
I certify that the above-r Regional Triennial Conve	named member is entitled to serve as a Delegention.	gate / Alternate to the PSAC North 8 <sup>th</sup>
Signature:		
Dan div.	for we saint of Delegate / Alternate and leatin	de la December 5, 2010

Deadline for receipt of Delegate / Alternate credentials is **December 5, 2019.** 

**Email form to:** bairdt@psac-afpc.com Fax form to: 1-867-669-0379

Mail form to: PSAC North, 4910–53 Street – Suite 201A, Yellowknife, NT, X1A 1V2