

25th Annual AFL Kids' Camp

LEADERS & JUNIOR COUNSELLORS FORM

August 5-9, 2019

Goldeye Centre near Nordegg on Goldeye Lake

Union: _____ Local: _____

Contact: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Union Phone: _____ Union Fax: _____

Union E-mail: _____

ADULT LEADER 1

First Name: _____ Last Name: _____

Male: _____ Female: _____

Address: _____

City: _____ Postal Code: _____ E-mail: _____

Home #: _____ Work #: _____ Cell #: _____

ADULT LEADER 2

First Name: _____ Last Name: _____

Male: _____ Female: _____

Address: _____

City: _____ Postal Code: _____ E-mail: _____

Home #: _____ Work #: _____ Cell #: _____

JUNIOR COUNSELLOR A

First Name: _____ Last Name: _____

Male: _____ Female: _____ Age: _____

Address: _____

City: _____ Postal Code: _____ E-mail: _____

Home #: _____ Work #: _____ Cell #: _____

Submit form to afl@afl.org or mail to: AFL Kids' Camp, c/o Alberta Federation of Labour,
#300, 10408 – 124 Street NW, Edmonton, AB T5N 1R5 or Fax: 780-484-5928

Thank you for supporting the AFL Kids' Camp