



**PSAC Prairie Region  
Convention  
June 12-14, 2020  
Delta Hotel, Regina, SK**

**DELEGATE CREDENTIAL**

**Must be postmarked no later than February 28, 2020.** Completed credential and cheque made payable to PSAC Prairie Region should be mailed to:

PSAC REVP Prairies Office  
460 – 175 Hargrave Street  
Winnipeg, MB R3C 3R8

**DELEGATES FROM LOCALS/BRANCHES**

The following member(s) has been duly elected/selected:	Component/DCL:	Local Number:
Name	Personal Email	Daytime Phone
SIGNATURE Local/Branch President	PRINT NAME Local/Branch President	DATE

**Registration fee of \$150 per delegate must be received before delegates receive an email with a link to register online**

**COMPONENT NATIONAL OFFICERS**

The following member is a Component National Officer within the Prairies	Component:
Name	Daytime Phone
Personal Email	
SIGNATURE Component President	PRINT NAME Component President
	DATE

**Registration fee of \$150 per delegate must be received before delegate receives an email with a link to register online**

**NATIONAL INDIGENOUS PEOPLES CIRCLE - Prairies Representatives**

Name	Personal Email	Daytime Phone
SIGNATURE REVP Prairies	PRINT NAME REVP Prairies	DATE

**No registration fee is required (will be paid directly by National Office). Will be signed by the REVP upon receipt.**

**DELEGATES FROM REGIONAL COMMITTEES/AREA COUNCILS (in good standing)**

The following member has been duly elected/selected:		Committee/AC:	
Name	Personal Email	Daytime Phone	
SIGNATURE REVP Prairies	PRINT NAME REVP Prairies	DATE	
<b>A copy of the minutes where the delegate was elected/selected must be attached to the credential. No registration fee is required (will be paid directly by the REVP Office). Will be signed by REVP upon receipt.</b>			

**DELEGATES FROM PRAIRIE REGION COUNCIL**

The following member is a member of the Prairie Region Council:		PRC Position:	
Name	Personal Email	Daytime Phone	
SIGNATURE REVP Prairies	PRINT NAME REVP Prairies	DATE	
<b>No registration fee is required (will be paid directly by the REVP Office). Will be signed by REVP upon receipt.</b>			

**REVP Office Use Only:**

Date Received: \_\_\_\_\_

MIGS Verified: \_\_\_\_\_

Registration Fee Required: Y / N

If Yes, was it attached: Y / N

Cheque #: \_\_\_\_\_ Cheque Amount: \$ \_\_\_\_\_

Additional Notes: