



WEST KOOTENAY LABOUR COUNCIL
101 Baker Street,
Nelson, B.C. V1L4H1

DELEGATES CREDENTIAL

Name of Affiliate: _____

Number of members affiliated: _____ (see note over)

Mailing Address: _____

Tel. No. (work) _____ (home) _____ (fax) _____

Credentialed Delegate:

Name _____

Address _____

Email: _____

Tel. No. (work) _____ (home) _____ (fax) _____

Signed by and for the above named affiliate

Presiding Officer

Officer with signing authority

Office held

Office held

Effective the _____ day of _____, 20____.

Expires the _____ day of _____, 20____.

FOR LABOUR COUNCIL USE ONLY

This credential was accepted at the Labour Council meeting held on _____, 20____.

Signed by the presiding officer _____