## **Expression of Interest Form**

## Are you interested in hosting any of the following in your community?

Please mark a maximum of 2 of the following to specify what workshops your community would like to hold (mark your first choice):



AWS Women & Leadership
munities in Bloom    HIGH FIVE @ Strongthoning Children's Children
— montrive strengthening Children's Mental
nmunity Cultural Planning Health
rd Governance (full day workshop)
rd Governance (shorter workshop)
ergenerational Communities
nt Writing Information:
rketing and Event Planning
ial Media Recreation Practitioners Meeting
ued Volunteer
provides what?
ommunity: District: Participants
imum of 10 people to  • Pays facilitator's fees  • Willing to attend the training
end the workshop  • Provides mileage (length and time vary)
lity large enough to reimbursement (if applicable) • Registration fee varies with
ommodate 15-20 people • Pays for participant's lunch and workshop selected
n tables and chairs that refreshments
ple can work at  • Advertises the event
erer for event lunch (if
licable)
ffins/fruit for registration
fee/Water/Tea
unity: Contact Name:
ng Street Address:
dees: Building Capacity: Is there internet? ☐ Y or ☐ No
ration refreshments and lunch menu (i.e. coffee and cookies, soup and sandwich, etc.):
ration refreshment fee (per person): Caterer fees (per person):
reimbursement (if applicable) Pays for participant's lunch and refreshments Paurity:  g Address: Number:  Begistration fee varies with workshop selected  reimbursement (if applicable) Pays for participant's lunch and refreshments  Advertises the event  Contact Name:  Email Address:  Building Name:

Please return to Bonnie Mills Midgley, Community Development Coordinator, by fax to 306-248-3484 or email to <a href="mailto:rwdscr.lloyd@sasktel.net">rwdscr.lloyd@sasktel.net</a>. For more information please phone 306-248-3518 or phone/text 306-344-7473.

