

NAME: (Please Print)

EMAIL ADDRESS:

City/Town

DECLARATION:

We undersigned, declare to the best of our knowledge, this is a true and accurate record of attendees for the _____ Leadership Committee's Event.

Signed this _____ day of _____, 20__.

Leadership Committee Member

Leadership Committee Member

Date Received at the SFFA Office: _____, 20__

Reviewed by Executive Director: _____

Comments:

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Fax: 306-975-1581
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