



ABED Cultural Presenter FORM

Name of Presenter: _____

Description, date and time of Presentation(s): _____

<p>Payable to: _____ First Name _____ Last Name _____ _____ Mailing Address _____ _____ Phone Number _____ Cell Phone _____</p> <p>Requested by: _____</p> <p>School: _____</p>	<p>Length of Presentation:</p> <p><input type="checkbox"/> ½ day \$75.00</p> <p><input type="checkbox"/> Full Day - \$150.00</p> <p><input type="checkbox"/> will be picked up at ABED office</p> <p>_____</p> <p><input type="checkbox"/> mail</p>
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Aboriginal Education Principal: _____

Office use only:	
Date Received _____	Cheque run: _____
Amount _____	Account _____

****This form must be received in the Aboriginal Education Department by Tuesday afternoon for the cheque to be ready by Friday morning. The presenter is to receive the cheque the day of the workshop if all the required information is in place. If the workshop is cancelled after the cheque has been prepared, the cheque must be returned to the ABED department.****