



# BC RECREATION & PARKS ASSOCIATION Appetite to Play Workshop Request Form



Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Organization: \_\_\_\_\_ Website: \_\_\_\_\_

Org Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

Work Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**1. Address where the workshop is taking place:**

**2. Number of registered participants: \_\_\_\_\_**

**3. Date(s)/Timing Requested (in order of preference):**

	DATE	TIME
1.		
2.		
3.		

**4. Is the course open to the public?     YES     NO**

**5. Please note that there will be a charge of \$35/participant to attend the workshop. You will receive an invoice from BCRPA for this amount so please collect the funds from participants before or at the workshop.**

**Send Completed Form to:**  
 Noelle Virtue at [atp@bcrpa.bc.ca](mailto:atp@bcrpa.bc.ca)  
 #301-470 Granville Street, Vancouver, BC V6C 1V5  
 Tel: 604-629-0965 ext 228 [www.bcrpa.bc.ca](http://www.bcrpa.bc.ca)