



CUPE Fraser Valley District Council

*Serving members of the Canadian Union of Public Employees in the
Fraser Valley since 1963*

ALTERNATE DELEGATE CREDENTIAL FORM

THIS IS TO CERTIFY THAT:

NAME: _____

ADDRESS: _____

_____ POSTAL CODE: _____

PHONE: Home: _____ Cell: _____

Has been selected in compliance with the By-Laws & Policies of the Fraser Valley District Council, chartered by the Canadian Union of Public Employees, to represent and serve as a delegate for:

NAME OF UNION: _____ LOCAL #: _____

Signed this _____ day of _____ 20 _____ A.D.

President: _____

Secretary: _____