



Ladies' Auxiliary
AB-NWT Command

LADIES' AUXILIARY ALBERTA N.W.T. – Command Officer/Council Travel Form

Name:	
Officer/Council Position:	Date:
Name of Auxiliary Visiting:	
Address of Auxiliary:	
Description/Purpose of Trip:	
Program Agenda:	
Date Left for Event:	Time Left for Event:
Date Event Starts:	Event Start Time:
Date Returned Home From Event:	Time:
Name of Hotel/Motel (if required):	
Address of Hotel/Motel:	
Notes:	
Signature	Date

This form must be completed and submitted to Command Office prior to travel date for insurance coverage purposes