

Presentation Booking Form

Youth Volunteer Connections Program

Contact Information

Name:

Organization / School:

Phone:

Email:

What is the best time to contact you?

Booking Information

Age range of group:

Total Number of Youth in Group:

Location of presentation:

Group description:

Special Needs for the Presentation:

Preferred Date:

Preferred Time:

Choose one: 1 HOUR PRESENTATION

2 HOUR PRESENTATION

Comments, questions or other relevant information:

PLEASE SEND FORM ATTN: YVCP

Email: youth.outreach@volunteervictoria.bc.ca

Fax Number: 250-386-2279

Questions?

Click www.volunteervictoria.bc.ca

Call 386-2269

Come in: 306-620 View Street Victoria BC V8W 1J6
