



New Activity Group Proposal

<p>1. Activity Name:</p>
<p>2. Describe in Detail This Activity Group:</p>
<p>3. Activity Group Leader(someone who will help guide and direct this group):</p> <p>Name: _____ Phone Number: _____</p> <p>Email: _____</p>
<p>4. Frequency of Activity(s). How often would this group meet and the length of time for each 'get-together'; also is this activity seasonal or weather permitting?</p> <p><input type="checkbox"/> Once per Week <input type="checkbox"/> Every other week <input type="checkbox"/> Once per Month <input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Seasonal: _____</p>
<p>5. Space Required – Please provide full details of what type of space is needed for this activity to take place?</p>

6. Are There Any Special Requirements For This Activity. Please list any specific needs for this activity. (ie. room lighting, odours/dust created, specific skills, etc)

7. What Equipment is Required For This Activity to Happen. Please be specific. (ie. sound system, lighting, boards/cards, types of chairs/tables, etc)

8. Please List Any Special Risks Associated With This Activity? (ie. not recommended for persons with heart conditions, carpooling, creates excessive dust, creates excessive noise, etc.)

9. Are there others who may be interested?

YES

NO

Please provide names and contact info.

10. Any Other Comments:

Please return this completed form to:

The Guelph Wellington Seniors Association
c/o Program Committee Chair
683 Woolwich Street
Guelph, Ontario N1H 38

Email applications to Pat Gage, Program Committee Chair at pat.gage@gwsa-guelph.ca

An online application can be completed and submitted directly on the GWSA website.