

# NEWFOUNDLAND AND LABRADOR COMMAND THE ROYAL CANADIAN LEGION

*Government of Newfoundland and Labrador &  
Provincial Command, The Royal Canadian Legion*

## 2016 PILGRIMAGE TO EUROPE 27 JUNE – 4 JULY (Tentative)

### CHAPERONE NOMINATION FORM

*All Nominees must be a Member in Good Standing, have contributed significantly with either The Royal Canadian Legion or the Ladies Auxiliary. Detailed below are additional requirements which must be met:*

- A. Active in the Branch or its Ladies Auxiliary.*
- B. Pass a Criminal Records Screening & a Vulnerable Sector Screening.*
- C. A written recommendation from the Branch President, must also accompany the Nomination Form.*

*When accepting the nomination a potential chaperone should take into consideration that the pilgrimage involves a week of travelling for long periods up to 10 hours every day. As well, supervision of the youth will require working from 0700hrs to 2300hrs daily. Walking over uneven grounds to participate in various activities is the norm. The weather varies but often reaches greater than 25 degrees Celsius. The chaperone should be aware that the pilgrimage can also be an emotional experience. Medical staff will be available for emotional support and physical assistance if needed.*

*All chaperon nominees MUST BE MEDICALLY FIT to participate. After initial selection chaperones will be required to obtain certification from their doctors, stating that they are medically capable to participate in the various events that are scheduled during the Pilgrimage.*

NOMINATION MUST BE  
SUBMITTED BY A BRANCH

ONE NOMINATION  
PER BRANCH

RETURN COMPLETED  
NOMINATION FORMS TO  
PROVINCIAL COMMAND

**NO LATER THAN**  
**12 February 2016**



NEWFOUNDLAND AND  
LABRADOR COMMAND  
THE ROYAL CANADIAN LEGION  
PO BOX 5745  
ST. JOHN'S, NL  
A1C 5X3

FAX #: (709) 753-5514

#### BRANCH INFORMATION

BRANCH NAME AND NUMBER		
PLEASE INDICATE IF YOUR NOMINEE HAS PARTICIPATED IN A PREVIOUS PROVINCIAL OR DOMINION PILGRIMAGE	YES	NO
	YEAR	
BRANCH PRESIDENT'S NAME	Signature	

#### NOMINEE INFORMATION

NAME	SIGNATURE	
MAILING ADDRESS	DATE OF BIRTH	
	EMAIL ADDRESS	
TELEPHONE NUMBER	FAX NUMBER	
YOUTH PROG EXP		
YOUTH PROG QUALS		
OTHER QUALS		
NOMINEE BIOGRAPHY (INCLUDED)	YES	NO