



Pembina Active Living (55+)

"Enhancing the lives of Older Adults"

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Program Design Form

If you have an idea for a new program, activity or event, that you would like to propose, please fill out the Program Design Form and mail to the PAL (55+) mailing address.

Name of Program or Event: _____

Program Description: _____

Program Goals:

- | | | |
|-------------------------------------|--|-----------------------------|
| <input type="radio"/> Socialization | <input type="radio"/> Advocacy | <input type="radio"/> Other |
| <input type="radio"/> Education | <input type="radio"/> Community Concerns | |
| <input type="radio"/> Exercise | <input type="radio"/> Healthy | |

Scope:

- | | |
|--|-------|
| <input type="radio"/> Length | _____ |
| <input type="radio"/> Time Frame | _____ |
| <input type="radio"/> Participation Capacity | _____ |
| <input type="radio"/> Target Audience | _____ |

Resources Required:

- | | | |
|---------------------------------|------------------------------------|---|
| <input type="radio"/> Space | <input type="radio"/> Refreshments | <input type="radio"/> Instructor/Peer Leader/Convener |
| <input type="radio"/> Materials | | |

Budget Required: (Provide breakdown and total)

Source of Funds: (eg registration fees, grants etc)

Publicity Request:

Other Information:

Participant's Name: _____

Home Phone: _____ Cell No.: _____

E-mail: _____ Member Number: _____

Submitted by Signature

Date of Submission