



**NORTHERN  
ASSOCIATION  
OF COMMUNITY  
COUNCILS**

**Northern Healthy Foods Initiative**

9-395 Berry St., Winnipeg, MB R3J 1N6

Phone: (204) 947-2227 Ext 2

Toll Free: 1-888-947-6222

Fax: 204-947-9446

Email: [programnhfi@naccmanitoba.com](mailto:programnhfi@naccmanitoba.com)

# Workshop Request Form

Full Name:

Community:

Date:

## Workshop Topics

Check the workshops you'd like to host.

### Foraging

- ☐ Mushrooms / medicinal plants
- ☐ Berry picking (blueberry, saskatoon, etc)

### Hunting and Fishing

- ☐ Canadian Firearm Safety Course, PAL Possession and Acquisition License
- ☐ Wilderness Survival
- ☐ Intergenerational Fishing
- ☐ Ice fishing

### Kitchen

- ☐ Community Kitchens: Meal prep & sharing
- ☐ Food Handler Certificate
- ☐ Wild game butchering: cleaning, equipment and cuts
- ☐ Smoking wild game meats
- ☐ Sausage Making
- ☐ Fish Cleaning techniques

### Food Preservation

- ☐ Canning- Fruit and Vegetable

### Livestock

- ☐ Poultry raising
- ☐ Meat Rabbits
- ☐ Pig rearing

- ☐ **Other topics** (if you have other workshop ideas, let us know):



**NORTHERN  
ASSOCIATION  
OF COMMUNITY  
COUNCILS**

**Northern Healthy Foods Initiative**

9-395 Berry St., Winnipeg, MB R3J 1N6

Phone: (204) 947-2227 Ext 2

Toll Free: 1-888-947-6222

Fax: 204-947-9446

Email: [programnhfi@naccmanitoba.com](mailto:programnhfi@naccmanitoba.com)

## Workshop Dates

For each workshop topic you checked above, write the title next to the month you'd like to host the workshop.

### Spring

March:

April:

May:

### Summer

June:

July:

August:

### Fall

September:

October:

November:

### Winter

December:

January

February:



**NORTHERN  
ASSOCIATION  
OF COMMUNITY  
COUNCILS**

**Northern Healthy Foods Initiative**

9-395 Berry St., Winnipeg, MB R3J 1N6

Phone: (204) 947-2227 Ext 2

Toll Free: 1-888-947-6222

Fax: 204-947-9446

Email: [programnhfi@naccmanitoba.com](mailto:programnhfi@naccmanitoba.com)

## Workshop Expenses

Please list the expenses that will be associated with running your NHFI workshop(s):

### Workshop title:

Select the type of expense and indicate the amount next to it.

- ☐ Training: \$
- ☐ Equipment/supplies: \$
- ☐ Food: \$
- ☐ Facilitator: \$
- ☐ Honoraria: \$
- ☐ Other: \$

In-Kind Contribution (\$):

### Workshop title:

Select the type of expense and indicate the amount next to it.

- ☐ Training: \$
- ☐ Equipment/supplies: \$
- ☐ Food: \$
- ☐ Facilitator: \$
- ☐ Honoraria: \$
- ☐ Other: \$

In-Kind Contribution (\$):

### Workshop title:

Select the type of expense and indicate the amount next to it.

- ☐ Training: \$
- ☐ Equipment/supplies: \$
- ☐ Food: \$
- ☐ Facilitator: \$
- ☐ Honoraria: \$
- ☐ Other: \$

In-Kind Contribution (\$):