

APPLICANT INFORMATION	
Name:	Date:
Address	
Phone:	Email:

ORGANIZATION INFORMATION (IF APPLICABLE)	
Name:	
Phone:	Email:

MEETING INFORMATION	
Date Requested:	Number Attending:
Name(s) of Presenter(s):	
Do you need to use your own presentation equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SUBJECT YOU WANT TO PRESENT

DETAILS OF THE SUBJECT - Include specific requests you have of Council

Please note if a Delegation wishes to make a presentation to Council, the Delegation must submit this request form and all pertinent background information to the Office of the CAO **no later than noon on the Wednesday prior to the Council meeting.**

Delegations are limited to 15 minutes at a Regular Council Meeting, unless at Council's discretion, longer time is required.

All written presentations will become a matter of public record, unless you inform this office otherwise, or it is deemed confidential.

I acknowledge that only the above matter will be discussed during the delegation. I further acknowledge that this meeting may be audio/video recorded, published online, and broadcast on television.	
Applicant Signature:	Date: