

DELEGATION REQUEST FORM

**Please fill out and return to the Clerk prior to
end of day on the Tuesday preceding the meeting you wish to speak at.
Can be delivered in person or emailed to the Clerk at
clerk@greatermadawaska.com**

**No delegations at Special Council Meetings or Emergency Electronic Meetings
unless approved by the Mayor and CAO**

I have read and understand the deputation protocol and understand that the information contained on this form, including any attachments, will become public documents and listed on Township Meeting Agendas and posted to the Township's website.

Date of meeting you wish to speak at: _____

Name of Organization/Person: _____

Name of Speaker(s): _____

Phone #: _____ Email: _____

Address: _____

Topic: _____

Is there a specific request that Council will be asked to consider? If yes, please provide the request.

Do you require any special equipment (ie: PowerPoint Projector/Overhead Projector Screen)?

Yes No

If yes, please indicate what is required _____

NOTE: We will try our best to supply you with whatever equipment is necessary but we cannot guarantee what will be available. You will be advised before your delegation what is available.

Have you submitted information to be shared with Council? Yes No

**** Please read the Delegation Information Sheet. If there is further information to be presented to Council, please attach it to this sheet. Please note that this form and any information provided may be attached to the agenda and circulated publicly (unless otherwise requested).

For office use only: Date Delegation was Submitted: _____

Approved by: _____ COMMENTS: _____