

## Delegation Request Form

I wish to appear before the Mattice – Val Côté Municipal Council

**Meeting Date:** \_\_\_\_\_

**Name of the delegate(s):** \_\_\_\_\_

\_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Capacity in which you will attend:**

Participate as an individual  Represent a group/organization

**Have you already contacted the administration about this?** Yes  No

**Reason(s) for requesting the delegation (subject to be discussed):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Will a PowerPoint presentation be made?** Yes  No

Note: An electronic copy of the PowerPoint presentation must be submitted to [gcouclombe@matticevalcote.ca](mailto:gcouclombe@matticevalcote.ca) by 11:00 a.m. on the Friday before the meeting.

Please attach any speaking notes and/or presentation materials.

The personal information contained in this form is required to communicate with individuals and/or organizations requesting the opportunity to appear as a delegation before Council.

Please note that all meetings are open to the public unless authorized by law to be closed to the public.