



**TOWNSHIP OF McNAB/BRAESIDE
REQUEST TO APPEAR AS A DELEGATE**

(PLEASE PRINT CLEARLY)

Delegations are allotted 15 minutes to present to Council, inclusive of questions.

I wish to appear before **Council** on _____
(Date)

(Meetings take place on the 1st and 3rd Tuesday of each month, at 6:00 p.m. unless otherwise noted).

Name of Organization/Person:
Address:
Email:
Telephone #:

REASON(S) FOR DELEGATION REQUEST (subject matter to be discussed):
Use a separate page if more space is required or attach additional documentation.

ADDITIONAL DOCUMENTATION AND PRESENTATION MATERIALS:

Additional documentation attached? Yes ☐ No ☐

Will a PowerPoint presentation be made? Yes ☐ No ☐

NOTE: An electronic copy of the PowerPoint presentation and/or any other documentation you wish to submit is required no later than 12:00 p.m. on the Wednesday before the meeting by sending it to the Clerk - mcannon@mcnabbraeside.com.