



## RM OF WOODLANDS

**PLEASE ENSURE THIS FORM IS FULLY COMPLETED**

PLEASE RETURN THIS APPLICATION VIA EMAIL TO [cao@rmwoodlands.ca](mailto:cao@rmwoodlands.ca) OR

VIA FAX: (204) 383-5169 OR HAND DELIVER TO THE RM OFFICE

NO LATER THAN **THURSDAY AT NOON** PRIOR TO COUNCIL/COMMITTEE MEETING DATE

*REQUEST TO APPEAR AS A DELEGATION BEFORE COUNCIL/COMMITTEE OF THE WHOLE*

**DATE OF MEETING:**

**NAME OF DELEGATE / ORGANIZATION:**

**FULL ADDRESS OF DELEGATE:**

**TELEPHONE # :  
(CELL CONTACT):**

**EMAIL ADDRESS:**

**SPOKESPERSON(S):**

**GENERAL NATURE OF PRESENTATION:**

**PLEASE INDICATE THE ACTION BEING REQUESTED BY COUNCIL:**

**PLEASE NOTE:**

- THE CHAIR MAY LIMIT THE TIME TAKEN BY A DELEGATION TO TEN (10) MINUTES. THE DELEGATION MUST APPOINT A SPOKESPERSON.
- TO ALLOW COUNCIL TO PREPARE FOR THE DELEGATION AND TO ENSURE EFFICIENT USE OF TIME FOR ALL INVOLVED, COUNCIL MUST BE PROVIDED WITH ANY PRESENTATIONS A MINIMUM OF NINETY-SIX (96) HOURS PRIOR TO THE SCHEDULED MEETING.
- THE C.A.O. MAY REQUEST ADDITIONAL INFORMATION AT HIS OR HER DISCRETION, PRIOR TO SCHEDULING THE DELEGATION.