

Email: creimer@coldlake.com

Form 11-00-06

## CITY of COLD LAKE

Cold Lake

## **Delegation Application**

To: The Office of the Chief Admini	strative Officer	
INVe, BILL PARKER	I/We,	780-201-5112
(Name)	(Telephone Number)	(Name) (Telephone Number)
Mailing Address 1942 Fa	OREST DRIVE COLD KAKE	ACBORTA TOMIMI
E-mail Address 950690	telusplanet net.	
request to appear as a delegation be	efore Cold Lake City Council at a meeting to be held o	on <u>march</u> 26 , 2019.
	l delegations, please indicate an alternate date or you	
The purpose of the delegation is to p	present the following: (see reverse for requirements)	
· A copy of all information regarding  Cold Lake Cruis  like to advis  and Dermissis  in grawing		Regust 16-18 2019. We evould and the Sequest assistance Community Events Programu Lestive event.
hear such delegations.  I/We acknowledge that only the above	ve matter will be discussed during the delegation.	FOR INTERNAL USE ONLY Request Approved by
Signed / Collin	Date	Date Approved for MARCH 26, 2019
Signed	Date	Date Approved for
Return completed application to the 5513-48 Avenue, Cold Lake, AB T9M 1. Phone: (780) 594-4494 Ext. 7967		cc:
Fax: (780) 594-3480		

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