

Email: creimer@coldlake.com

F . . . 44 00 00

## Cold Lake

## **Delegation Application**

To: The Office of the Chief Administrative	Officer		
IWe, Kicki-Lynne Jean	10.813.9013 I/We,		_
(Name)	(Telephone Number)	(Name)	(Telephone Number)
Mailing Address 206, 104 10	st, Cold Lake,	AB, Tamia	6
E-mail Address rickilynne jean mail.com			
request to appear as a delegation before Col		be held on Augus	st 8 , 20 <u>23</u> .
*Please Note: In the event of several delegations, please indicate an alternate date or you will be assigned to the next available meeting.			
The purpose of the delegation is to present the following: (see reverse for requirements) Submit a request for action /			
• A copy of all information regarding the topic must accompany the application.			
		findraising	went on Kinuson Bead
We would like to coordinate an annual fundraising event on			
Kinosa Beach benefitting Kids With Cancer Society. It will be a			
family event that includes 12 activity stations, sparkle tattoos, bouncy			
castles, back to school BBQ, rendors. We have sponsors, old Dutch,			
Harnels, and two other local anon. sponsors. We also have volunteers			
* Where the subject matter of a delegation perta hear such delegations.	ins to legal matters, personnel, and/or p	private property issues, the City	of Cold Lake reserves the right not to
I/We acknowledge that only the above matter	will be discussed during the delega	tion.	AL USE ONLY
Signed Rem Kun [	Date tug 1123	Request App	roved by
Signed	Date	Date Approv	ed for <u>Aua. 8/23</u>
Return completed application to the City of Cold Lake 5513-48 Avenue, Cold Lake, AB T9M 1A1		сс:	
Phone: (780) 594-4494 Ext. 7967		□ Other	
Fax: (780) 594-3480			

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