



Delegation Application

I/We, Chad Colbourne	780-812-0910	I/We, Katrina Reid	780-573-0582
(Name) 4610 E 46 Avo. Boy	(Telephone Number)	(Name)	(Telephone Number)
Mailing Address 4610 E 46 Ave Bo			
E-mail Address Katrina.reid@centu			
request to appear as a delegation before	ore Cold Lake City Council at	a meeting to be held on February 2	5 MARCH 11 , 20 ²⁵ .
*Please Note: In the event of several of	delegations, please indicate a	n alternate date or you will be assigne	ed to the next available meeting.
The purpose of the delegation is to pre	esent the following: (see reverse	for requirements)	
• A copy of all information regarding the	ne topic must accompany the	application.	
To present Lakeland Xtreme Bron	ncs and Bulls event thats ta	aking place on May 9th and 10th i	n the City of Cold Lake at the
Energy Center			
* Where the subject matter of a delegatio hear such delegations.	on pertains to legal matters, pers	sonnel, and/or private property issues, th	e City of Cold Lake reserves the right not to
hear such delegations. I/We ack <mark>nowledge</mark> that only the above	e matter will be discussed duri	ing the delegation.	ERNAL USE ONLY
hear such delegations. I/We acknowledge that only the above Signed	e matter will be discussed duri 02/13/25 Date	ing the delegation.	Approved by
hear such delegations. I/We acknowledge that only the above Signed Chad Colbourne 02/1	e matter will be discussed duri	ing the delegation.	ERNAL USE ONLY
hear such delegations. I/We acknowledge that only the above Signed Chad Colbourne 02/ Signed Katrina Reid 02/1 Return completed application to the	e matter will be discussed duri ^{13/25} Date 	ing the delegation.	Approved by
hear such delegations. I/We acknowledge that only the above Signed Chad Colbourne 02/1 Signed Katrina Reid 02/1 Return completed application to the 5513-48 Avenue, Cold Lake, AB T9M 1A	e matter will be discussed duri ^{13/25} Date 	ing the delegation. Request Date Ap	PERNAL USE ONLY Approved by proved for
hear such delegations. I/We acknowledge that only the above Signed Chad Colbourne 02/ Signed Katrina Reid 02/1 Return completed application to the	e matter will be discussed duri 02/13/25 Date 3/25 Date 02/13/25 Date 02/13/25 Date 02/13/25 Date 02/13/25 Date	ing the delegation. Request Date Ap cc: □ Other	PERNAL USE ONLY