## TOWN OF UEGREUILLE

Town of Vegreville 4829 50 Street Postal Drawer 640 VEGREVILLE, ALBERTA T9C 1R7

T: 780-632-2606 | F: 780-632-3088 vegtown@vegreville.com | www.vegreville.com

## **Council Delegation Request Form**

Name(s) of person(s) or group wishing to appear before Council

Subject of Presentation

Purpose of Presentation

Information only

 $\Box$  Requesting a Letter of Support

- $\Box$  Requesting funds
- $\Box$  Other (provide details)

Meeting date requested (to view the meeting schedule calendar, please visit www.vegreville.com/public/download/files/105819)

a. Legislative Committee Meeting (30 minutes max)

b. Town Council Meeting (15 minutes max)

Contact Person: \_\_\_\_\_

Phone:\_\_\_\_\_

Email: \_\_\_\_\_

Presentation materials and supporting documentation is required for publication in the agenda package (submission deadline is 4:30pm the Wednesday before the scheduled meeting.)

Technical Requirements:

- flip chart
  Projector
- 🗌 laptop
- $\Box$  other