









Purpose of Delegation (please circle one)

Request Action/ Support/
Policy Change

Request Funds

Other (please specify)

Desired Resolution (please indicate the outcome you would like from Council)

Activities to date relative to the matter (fundraising, campaigns, other organizational support, etc.)

Financial Implications

To be used only if funding is being requested. Please identify amount and purpose for the funds.

Acknowledgements	Initial
I acknowledge that my presentation is limited to ten (10) minutes total, not including questions or deliberation from Council.	
I acknowledge that I shall provide all the necessary information and presentation materials to Town of Taber Administration prior to the deadline* for inclusion in the agenda.	
I understand that the information provided herein and in my presentation along with my name and contact information will become part of the public record and part of the Town's official documents and recordings of Council meetings. I also acknowledge that these materials are available for the public to access on various Town channels.	





*The deadline for submissions is no less than seven (7) working days prior to the Council meeting you wish to attend.

