



Box 30, 400 - 10th Street
Beaverlodge, AB T0H 0C0

DELEGATIONS TO COUNCIL

Name of Delegates(s): _____

Representing: _____

Phone Number: _____

Email: _____

Topic: _____

Staff Familiar with topic: _____

Attached Information: _____

Notes: Limit presentation to 15 minutes

Delegate Signature: _____

Date: _____

All notifications and documentations must be sent to nyoung@beaverlodge.ca
If you have materials/documentation to be included in the Agenda, they must be received by 1:00pm the
Tuesday before the meeting you are scheduled to appear before Council.

**Any documentation submitted (including this Delegate Application)
is considered "Public Information" and will appear in a Council Agenda.**

.....
FOR OFFICE USE ONLY

Date and Time of Council Meeting to attend: _____

Approved to Present by: _____ Date: _____

***Town of Beaverlodge's Legislative Meetings are being live streamed effective June 12, 2023
via Council resolution #145-2023-05-23***

 **Email**
town@beaverlodge.ca

 **Phone**
780-354-2201

 **Website**
beaverlodge.ca