

## Delegate Request Form

Fax form to: 306-883-2557 or email to: admin@rmofspiritwood.ca  
(Please print clearly in the spaces provided)

Date of Request: \_\_\_\_\_

### Office Use

- Emailed
- Faxed
- Office
- Other Documentation included

Date Received: \_\_\_\_\_

### Contact Information

Last Name		First Name	
Company Name			
Contact Number		Email	

### Council Meeting Details

Council/Committee Meeting Date

Who are you representing? (Yourself or a group – If representing a group, please enter the complete mailing address.)

Issue to be presented (Please give a brief description of your concern)

Specific action to be requested of Council

### Collection of Personal Information

Please check here to indicate that you have read the statement below.

The Rural Municipality of Spiritwood No. 496 collects this information to enable it to make informed decisions on the relevant issue(s). If you are submitting letters, faxes, emails, presentations or other communication to the Municipality, you should be aware that your name and/or submission(s) may become part of the public record and may appear on the RM of Spiritwood's website.