



Register as a Delegation Form

Please PRINT

Delegate Name	First:	Last:	
Email Address			
Home Phone No.		Cell Phone No.	
Business Phone No.		Fax No.	
Firm/Organization Name <i>(if applicable)</i>			
Firm/Organization Full Mailing Address <i>(if applicable)</i>			
Subject of Delegation			
Date of Meeting	Month:	Day:	Year:
Agenda Item you wish to speak to			
What Equipment do you require? <i>Please check off</i>	<input type="checkbox"/>	Overhead Projector	
	<input type="checkbox"/>	LCD Data Projector	
	<input type="checkbox"/>	Laptop	
Additional Comments			

Send via Fax: 905-873-1431 (attention Council & Committee Services Coordinator)
 Send via email: reeneb@haltonhills.ca
 Send via mail: Attention: Council & Committee Services Coordinator, Town of Halton Hills,
 1 Halton Hills Drive, Halton Hills, ON L7G 5G2

Or deliver to: Finance & Corporate Services Counter, Upper Floor, 1 Halton Hills Drive