## **Delegation Request**

For Office Use Only: Meeting Name: Meeting Date:

Please complete this form for your request to delegate to Council or Committee on a matter where a decision of the Council may be required. Delegations at Council meetings are generally limited to agenda business published with the

				v business within the jurisdiction and authority of ting agenda. All delegations are limited to five	
Attention:	City Clerk	Clerk's Office, City of Brampton, 2 Wellington Street West, Brampton ON L6Y 4R2			
Email:	cityclerks	lerksoffice@brampton.ca Telephone: (905) 874-2100 Fax: (905) 874-2119			
Meeting:		y Council mmittee of Council		Planning and Development Committee Other Committee:	
Meeting Date Requested			Agenda Item (	(if applicable):	
Name of Individual(s):		Kurian Prakkanam			
Position/Title:		President			
Organization/Person being represented:		Brampton Malayalee Sama	ajam /Brampton B	Boat Race	
Full Address for Contact				Telephone:	
				Email:	
Subject Matt to be Discus	ter	aming			
Request to Council/Comm	Post F		on requesting for I	Naming a Park for Our community and Brampto	n
Attendance: A formal prese Presentation for	ntation will a	Remote ccompany my delegation: PowerPoint File (.ppt) Picture File (.jpg)	✓ Yes ☐ Adobe File ☐ Video File	□ No le or equivalent (.pdf) e (.mp4) □ Other:	
Additional information/materials will be distributed with my delegation: 🗹 Yes 🔃 No 🛄 Attached					
Note: Delegate (i) all bac	es are reques ekground mat ution at the n	sted to provide to the City C	lerk's Office well or publication with	I in advance of the meeting date: h the meeting agenda and /or	
Once this com appropriate me	•	,	d's Office, you will	l be contacted to confirm your placement on the	-