

**Bylaw No. 1/2021**  
**Form 2 – Request for Delegation**  
**RM of Cana No. 214**

Date:	Name:
Mailing Address:	

Please check your preferred method of communication:

<input type="checkbox"/>	Telephone (Daytime):
<input type="checkbox"/>	E-mail:

Note: If “Telephone” is selected all written communications will be sent by mail.

**Subject:**


**Supporting Documentation:**


Note: This application and any supporting documentation must be received by the Administrator at least two (2) business days prior to a Council meeting. Any delegation that does not meet this deadline may not be heard by council and any supporting documentation not received by the deadline may not be presented to council unless the majority of members vote to allow the delegation to speak and/or present the supporting documentation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
*OFFICE USE ONLY*      Council Meeting Date: \_\_\_\_\_