



COMMITTEE OF THE WHOLE DEPUTATION FORM

Date:
Agenda Item No:
Subject:

Please Print

Name:
Firm or Business Name: <i>(if applicable)</i>
Address: <i>No., Street Name</i> <i>Suite No.</i>
<i>City, Town</i> <i>Postal Code</i>
NAME OF FIRM OR ASSOCIATION BEING REPRESENTED: <i>(if applicable)</i>
I will be speaking regarding this matter. <input type="checkbox"/>
I do not wish to speak but want to be notified of the outcome of this matter. <input type="checkbox"/>

Personal information on this form will be used for the purposes of sending correspondence relating to matters before Council. Your name, address, comments and any other personal information is being collected and maintained for the purpose of creating a record that is available to the general public in a hard copy format and on the internet in an electronic format pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56, as amended. Questions about this collection should be directed to the City Clerk, City of Vaughan, 2141 Major Mackenzie Drive, Vaughan, Ontario, L6A 1T1, Telephone Number: (905) 832-8504.

- **YOU MAY ADDRESS COUNCIL ON ANY ITEM LISTED ON THE AGENDA.**
- **ANY DEPUTATION ON BEHALF OF AN ORGANIZATION, INCLUDING ANY CORPORATION/ASSOCIATION, OR ON BEHALF OF ANY GROUP, SHALL BE MADE BY A SINGLE REPRESENTATIVE.**

Please see the City Clerk’s Office Department Staff prior to commencement of meeting if you require any assistance or information. Please see the back of this form for further information.

GUIDELINES FOR DEPUTANTS

- 1. Hand this form in to the City Clerk's Staff when you step up to the podium.**
- 2. Before you commence your deputation, state your name, address, and if you are representing any organization or association.**
- 3. When addressing Committee, all comments and questions should be directed through the Chair of the meeting and not to a specific Member of Council or Staff person.**