



PRESENTATION REQUEST

PLEASE PRINT			
Subject:			
Preferred Date:		Alternate Date:	
First Name:		Last Name:	
Address (Street/Apt. No./P.O. Box No./R.R. No.)		City or Town	Postal Code
Home/Cell Number:	Business Phone:	Fax No.:	E-mail Address:
NAME OF GROUP OR PERSON(S) BEING REPRESENTED (if applicable), INCLUDING THE PERSON(S) WHO WILL BE SPEAKING AND/OR PRESENT AT THE MEETING:			
BRIEF STATEMENT OF PURPOSE OF PRESENTATION:			
Do you Require Audio-Visual Equipment?		Yes	No
If yes, please contact the Legislative and Court Services Department to make arrangements.			
WHAT FORMAT? i.e. PowerPoint, Overhead slides etc. (Note: a maximum of 12 slides is recommended).			
PowerPoint	Audio	Windows Media Player	Version #

Personal information on this form is collected under the legal authority of the Municipal Act, S.O. 2001, c.25 as amended. The information is collected and maintained for the purpose of creating a record that is available to the general public pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the City Clerk, City of Barrie, 70 Collier Street, P.O. Box 400, Barrie, L4M 4T5, Telephone 705-739-4220, extension 5500.