



## Delegation Request Form

Please submit the completed form to the City Clerk by email at [clerks@sarnia.ca](mailto:clerks@sarnia.ca), or in person or by mail to 255 Christina St N, Sarnia, ON N7T 7N2.

### Delegate Information

Name of Delegate(s):

Group, Organization, or Business Delegation Represents (if applicable):

### Delegation Request

General Nature/Purpose of the Delegation (clearly state the nature of the matter to be discussed and provide a general summary of the information to be presented):

Indicate the action you would like Sarnia City Council to take with respect to the above-noted subject matter:

### Presentation

Will you have a visual presentation?  
(ie. Powerpoint, pictures, etc)

Yes  
No

*Any person seeking to show an electronic presentation at a meeting shall be required to supply a copy to the City Clerk's office sufficiently in advance of the meeting.*

**Personal information collected on this page will be published as an item on the Council Agenda and form part of the public record.**

## Contact Information

Address (Street, City, Postal Code):

---

Phone Number:

---

Email:

## Accessibility Information

Will you require accessibility accommodations?

Yes

No

If yes, what accommodation(s) do you require?

## Privacy Statement

Personal information is collected under the authority of the City of Sarnia Procedure By-Law. Personal information provided on page two of this form will be used to contact the named delegate. Questions about the collection of this information can be directed to the Office of the City Clerk at (519) 332-0330 x. 3320 or [clerks@sarnia.ca](mailto:clerks@sarnia.ca).