

Delegation Request Form



Appearing Before the Board as a Delegation

Instructions and Information

Board meetings are generally held on the third Thursday of each month. Please refer to the calendar on the [CSRD's website](#) for the actual dates, or contact the CSRD offices at 250-832-8194 for the upcoming Board Meeting dates.

Delegations are limited to three (3) per meeting; slots often book up quickly.

Delegations are permitted up to fifteen (15) minutes for their presentation. Board members may ask questions after the presentation for clarification.

In order to schedule a date to appear before the Board, delegations must provide the information on the attached form. This information will be included in the agenda. By providing this detail it clarifies the purpose of the delegation for the Board and allows Board members and staff to become familiar with your topic and to obtain any necessary background information.

Your contact information will be included with your delegation information and circulated to the Board. If you do not wish your address to be included in the public agenda, please advise Corporate Administration Services at the time your Delegation request is submitted.

Contact Information

Name of Person or Organization *

Tourism Golden Association

Contact Information Provided * (?)

☐ Phone Number ☒ Email Address ☐ Mailing Address

Email Address *

joanne@tourismgolden.com

If your application is approved, it will be included on the Board meeting agenda. Do you consent to your personal information being included on the Board Agenda? *

☒ Yes ☐ No

Presentation Information

Topic of discussion *

Highlights from the Tourism Golden 2018 Annual Report

Purpose of Presentation *

Note: A letter outlining the Request or the Information must accompany the Delegation Request form

- ☒ Information Only
☐ Requesting Support
☐ Requesting Funding
☐ Other

Meeting Date Requested * (?)

20-Jun-19

Alternate Date Requested (?)

18-Jul-19

<input type="checkbox"/> CAO <input type="checkbox"/> Works <input type="checkbox"/> PS <input checked="" type="checkbox"/> Fin/Adm	<input checked="" type="checkbox"/> Agenda <input type="checkbox"/> Reg Board <input type="checkbox"/> In Camera <input type="checkbox"/> Other Mtg	Ownership File#
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<input type="checkbox"/> Ec Dev <input type="checkbox"/> IT <input type="checkbox"/> Parks <input type="checkbox"/> SEP <input type="checkbox"/> HR <input type="checkbox"/> Other	RECEIVED <input type="checkbox"/> Staff to Report <input type="checkbox"/> Staff to Respond <input type="checkbox"/> Staff Info Only <input type="checkbox"/> Dir Mailbox <input type="checkbox"/> Dir Circulate	Ack Sent: <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/> Email