

Request to Appear as a Delegation

Second Presenter's Name

TBD

Organization Name (if applicable)				
Prince George Down	ntown BIA				
Applicant / Contact I	First Name *	Applicant / Conta	ct Last Name *		
Colleen		Van Mook			
Mailing Address *					
14067 2nd Avenue					
City / Town *	Province *	Country	Postal Code *		
Prince George	British Columbia	Canada	V2L 3B6		
Primary Phone Num	ber*	Email Address *			
250-614-1330		colleenvm@downtownpg.com			
Presentatio	n Information				
First Presenter's Na	me *	First Presenter's Title / Position *			
Colleen Van Mook		Executive Director			

Second Presenter's Title / Position

President and/or Vice President

Presentation Topic * Annual Presentation/Report for 2021 from the Downtown Prince George Business Improvement Association following our AGM that is scheduled for June 8, 2022 Purpose of Presentation and/or Action You Wish Council to Take * Information Only Request for a Letter of Support Request for Funding or Financial Support Other (please provide details) Other Purpose of Presentation / Action * To provided required submissions as per BYLAW NO. 8929, 2018 Please list your requested Council meeting date. 6/27/2022 What is your preferred method of delivery for your delegation presentation? * In person C Zoom Telephone Will You be Providing Supporting Documentation (PowerPoint, Brochures, etc.)? * Yes No All presentation materials and documentation must be provided a by 12:00 p.m., two Wednesdays in advance of your intended meeting date. What types of materials will be provided? * PowerPoint Presentation

Other (please specify)

List Any Additional Technical Requirements								