Request to Appear as a Delegation

Applicant Information

Organization Name (if applicable) Prince George Air Improvement Round Table Applicant / Contact First Name * Applicant / Contact Last Name * Patience Rakochy Mailing Address * 1488 4th Ave City / Town * Province * Country Postal Code * British Columbia Canada V2L 4Y2 Prince George **Primary Phone Number * Email Address * Presentation Information** First Presenter's Name * First Presenter's Title / Position * Patience Rakochy Program Lead/General Manager Second Presenter's Name Second Presenter's Title / Position

Prince George Air Improvement Roundtable Update		
Information Only	Request for a Letter of Support	
Request for Funding or Financial Support	Other (please provide details)	
Have You Spoken with City Staff Regarding Y	our Proposed Delegation Topic?*	
☐ Yes	№ No	
Please list your requested Council meeting d	ate.	
6/26/2023		
What is your preferred method of delivery for In person Zoom Telephone	your delegation presentation?*	
Will You be Providing Supporting Documenta Yes No	ation (PowerPoint, Brochures, etc.)?*	
All presentation materials and documentation must advance of your intended meeting date.	st be provided a by 12:00 p.m., two Wednesdays in	
What types of materials will be provided?*		
PowerPoint Presentation	☐ Handouts	
Other (please specify)		