

# Delegation Request

This request and any written submissions or background information for consideration by either Council or Committees of Council is being submitted to Legislative Services.

**Council or Committee (Choose One) \***

Council

**Council or Committee Meeting Date \* ?**

2024-9-24



**Subject \***

Highland Gate Park Dog Runs

**Full Name of Spokesperson and Name of Group or Person(s) being Represented (if applicable) \***

Gordon Weir

**Brief Summary of Issue or Purpose of Delegation \***

Neighbourhood Opposition to Dog Runs

**Have you been in contact with a Town staff or Council member regarding your matter of interest? \***

☒ Yes

☐ No

**Full name of the Town staff or Council member with whom you spoke**

Tom Mrakas

**Date you spoke with Town staff or a Council member**

2024-9-16



**I acknowledge that the Procedure By-law permits five (5) minutes for Delegations. \***

☒ Agree