

# 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) \***

Committee of the Whole

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

2025-5-27



**Subject \***

PLF4M Delegation

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

Recreation & Healthy Active Living Leadership Course Students

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

The students to share with council their thoughts and ideas from 2025 course.

**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**

Hailey Jones

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

2025-5-2



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

☒ Agree

**I acknowledge that I understand and accept the delegate conduct expectations as outlined in Section 32(b) of the Procedure By-law 6228-19, as amended (link below) \***

☒ Agree

[Click to view Procedure By-law 6228-19, as amended.](#)