

Online Delegation Form

MAYOR AND MEMBERS OF COUNCIL, I/WE ARE HERE ON BEHALF OF:

The Grand Forks Seniors Society

TO REQUEST THAT YOU CONSIDER:

An update on the success thus far of the senior centre

THE REASONS THAT I/WE ARE REQUESTING THIS ACTION ARE:

We are growing exponentially and our membership demand more activities and community events. We want to make this happen through the support of council. A small presentation on our successes and requests for support from our council for continued success.

I/WE BELIEVE THAT IN APPROVING OUR REQUEST THE COMMUNITY WILL BENEFIT BY:

Bringing the community together and making the senior centre accessible to all through programs and events.

I/WE BELIEVE THAT BY NOT APPROVING OUR REQUEST THE RESULT WILL BE:

We strongly believe that our council will support us in our endeavors.

IN CONCLUSION, I/WE REQUEST THAT COUNCIL FOR THE CITY OF GRAND FORKS ADOPT A RESOLUTION STATING:

That the seniors of Grand Forks are important to the community and that the City will support all efforts of the Grand Forks Seniors Society to grow and enhance the senior centre for all.

NAME

Juliana Chadwick/Duane Gonvick

ORGANIZATION

The Grand Forks Seniors Society

MAILING ADDRESS

PO Box 553

565 71st Avenue

Grand Forks, British Columbia V0H 1H0

Canada

TELEPHONE NUMBER

EMAIL ADDRESS

grandforksseniors@gmail.com

MEETING SCHEDULE



✓ Committee of the Whole meetings start at 10:00am and delegations are generally scheduled at the start of the meeting. I acknowledge the start time of the meeting.

PRESENTATION TIME/SUPPLEMENTAL DOCUMENTS

✓ Presentations are limited to 10 minutes plus questions. Supporting documents should be provided to City Hall (email info@grandforks.ca) the Tuesday before the meeting for inclusion in Council's agenda package. Presentation slides should be limited to 10-15 pages to fit in the allotted time.