



APPLICATION FOR PROCLAMATION

(Please complete and submit your completed form to the Town Clerk @ clerks@richmondhill.ca at least three weeks in advance of the occasion)

(905) 771-2502

ATTN: LISA BOGATKO

RECEIVED

APR 25 2019

RICHMOND HILL CLERK'S DEPT.

Please Print

ORGANIZATION NAME: _____

CONTACT NAME: Mr. ☒ Mrs. ☐ Ms. ☐ Miss ☐ STEVEN SHEPHERD

ADDRESS: _____

CITY/TOWN: RICHMOND HILL

PROVINCE: ONTARIO POSTAL CODE: _____

HOME PHONE: _____ BUSINESS PHONE: _____

FACSIMILE: _____ EMAIL: _____

PROCLAMATION REQUESTED (Name or title of proclamation):

MAY - LYME AWARENESS MONTH

DATES OF PROCLAMATION (Please check and insert dates)

☐ Day(s) _____ ☐ Week _____

☒ Month MAY

PURPOSE OF PROCLAMATION (Please check all that apply):

☐ Civic Promotions ☒ Public Awareness Campaign ☐ Charitable Fundraising Campaign

☐ Arts and Cultural Celebration ☐ Special Honor for individual or Organization

☐ Other (please explain) _____

DESCRIPTION OF YOUR ORGANIZATION (Please include a brief description and any other relevant information related to your request. Additional information/documentation may be attached to this application):

Has the same or a similar proclamation been requested of the Richmond Hill Council in past years?

☐ Yes (insert date of previous request) _____

☒ No (new request)

You must provide the draft wording for your proclamation in order to receive an official signed proclamation from the Mayor.