



Town of Drayton Valley

Proclamation Request Form

Name (s): _____

Organization: _____

Contact Number: _____ Contact E-mail: _____

Mailing Address: _____

Description of Proclamation requested:

* Request must be received a minimum of TWO WEEKS prior to the meeting being requested for; please refer to the Meeting Schedule for dates

Additional Information Provided

Please list the information you attached or included with your proclamation request:

Please indicate any preference you have for meeting:

Please submit your request by:

Fax: 780.542.5753

E-mail: admin-support@draytonvalley.ca

Mail: Box 6837, Drayton Valley, AB T7A 1A1

In person: 5120-52 ST
Drayton Valley, AB