

Form: Request to Speak to Committee of Council
Submitted on Tuesday, November 28, 2017 - 11:44am

==Committee Requested==

Committee: Emergency & Community Services

==Requestor Information==

Name of Individual: John Parker

Name of Organization: Hamilton Health Sciences

Contact Number:

Email Address: _____

Mailing Address:

237 Barton Street E - 7 North Room 722

Hamilton, ON

L8L 2X2

Reason(s) for delegation request:

To speak about our partnerships with the Xperience Annex
and work with Youth

For Thursday, December 7th, 2017 ECS Committee in
support of the Information Report on the Xperience Annex.

Will you be requesting funds from the City? No

Will you be submitting a formal presentation? No