



2.2

Hamilton Police Services Board Deputation Request Form

(Request to appear before the Police Services Board)

****Please note** - The information on this form will be published on a public agenda and therefore released to the public and media.**

Your Name: Sarah Warry-Poljanski

Firm / Organization:
(if applicable) _____

E-mail Address: Sarahwpoljanski@gmail.com

Home Phone: 905 538 4793

Fax No.: _____

Business Phone: 905 923 3442

Mailing Address: 33 Welbourn Dr, Hamilton Ontario L9A 3N1

Details of Deputation to be discussed including a summary and the objective(s) of the presentation:

Discussion about safe injection sites, and the overall relationship
between
police and individuals identified as addicts in the city of Hamilton.

Will you require a LCD Projector: Yes No
(Please note, you must bring your own computer)

Have discussions or correspondence taken place with a member of the Hamilton Police Services Board or the Administrator? If so, with whom and when?

N/A

Please submit the completed form either in person, via fax or e-mail to:

Administrator
Hamilton Police Services Board
155 King William Street
P.O. Box 1060, LCD1
Hamilton, ON
L8N 4C1

Fax: 905-546-4720
E-Mail: lois.morin@hamilton.ca