



## Township of Georgian Bay

### Courtesy Flag Raising Procedure Pursuant to Policy No.

**Name of Organization:** \_\_\_\_\_

Non Profit/Charitable \_\_\_\_\_

**Contact Details:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**Name of Event:** \_\_\_\_\_

**Date of Event:** \_\_\_\_\_

**Request Received in writing (30 days prior to event):** \_\_\_\_\_

Photo/sketch of flag attached \_\_\_\_\_ Dimensions: \_\_\_\_\_

**Time Frame Requested (maximum of 5 days):**

From \_\_\_\_\_ To \_\_\_\_\_

**Flag Raising Ceremony:**

Date \_\_\_\_\_ Time \_\_\_\_\_

**Mayor/Council member attendance requested** \_\_\_\_\_

*Personal information on this form is collected under the legal authority of the Municipal Act, 2001, S.O. 2001, c. 25 as amended. The information is collected and maintained for the purpose of administering the Township Flag Policy pursuant to s. 27 of the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Office the Clerk, Corporation of the Township of Georgian Bay, 99 Lone Pine Road, Port Seven, ON L 0K 1S0, Telephone: 705-538-1850.*

*Office Use Only:*

**Request Granted:**

CAO: \_\_\_\_\_ Date: \_\_\_\_\_

1. *If Mayor/Council member attendance requested:*

a) *Member attending:* \_\_\_\_\_

b) *Date confirmed* \_\_\_\_\_

2. *Flag retrieved by organization within five days after flag:*

*Date:* \_\_\_\_\_

**Request Denied:**

CAO: \_\_\_\_\_ Date: \_\_\_\_\_

*Reasons for Denial:*

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