ATTACHMENT 1



FLAG RAISING & PROCLAMATION REQUEST FORM

I am requesting the following (please select all that apply):			
Flag Raising (Complete Parts 1-3, Parts 5 & 6, Annex A, Annex B)			
Proclamation (Complete Parts 1-4)			
PART 1: ORGANIZATION DETAILS			
ORGANIZATION NAME			
FLEX FOR ACCESS INC.			
ORGANIZATION TYPE			
Public Institution - Non Profit organization			
PART 2: REQUESTER DETAILS			
LAST NAME OR SINGLE NAME	FIRST NAME		
SILVED	JE55		
STREET ADDRESS	0000	APT/UNIT NUMBER	
CITY/TOWN	PROVINCE	POSTAL CODE	
EMAIL ADDRESS	TELEPHONE NUMBER		
Flexcoraccessagnal.com		`	
PART 3: ALTERNATE CONTACT DETAILS			
LAST NAME OR SINGLE NAME	FIRST NAME		
BELMONTE	MAURIZIO		
STREET ADDRESS		APT/UNIT NUMBER	
CITY/TOWN	PROVINCE	POSTAL CODE	
EMAIL ADDRESS	TELEPHONE NUMBER		

PART 4: PROCLAMATION REQUEST DETAILS			
CAUSE/EVENT/COMMEMORATION TO BE PROCLAIMED (Written as you want it to be Declared by Council)			
Work cerebral Palsy LCP JAWATERES Day			
Ø DAY	WEEK	○ монтн	
PART 5: FLAG RAISING DETAILS			
CAUSE/EVENT/COMMEMORATION TO BE RECO			
FLAG TO BE RAISED (Please attach an image of the flag to this form)			
ANTHEM OR MUSIC TO BE PLAYED (If required)			
WILL THERE BE A PUBLIC EVENT AT CITY HALL FOLLOWING THE FLAG RAISING CEREMONY? YES - To book an appropriate space at City Hall and required equipment following the ceremony, please contact Recreation Services by telephone at (905) 832-8500 or by email at RecCSD@vaughan.ca.			
○ NO			
PART 6: PUBLIC CEREMONY DETAILS			
The City of Vaughan endeavors to accommodate the requestor's preferred date, however it is NOT GUARANTEED . To assist in scheduling your public ceremony, we ask you to designate up to 3 alternate dates for booking.			
PREFERRED CEREMONY DATE	ALTERNATE CEREMONY DA	ATE 1	
ALTERNATE CEREMONY DATE 2	ALTERNATE CEREMONY DA	ATE 3	
TIME OF DAY PREFERENCE		4	
AM (09:00 a.m. – 12:00 p.m.)	PM (12:00 p.m.	– 4:00 p.m.)	