

"Getting Started" Information Form

Name			
Address		City	Brantford, Ontario
Postal Code	Phone		Email
	omplete the information below ir best to accommodate your		a neighbourhood association in your area. We
Why wou	ld you like to be involved in	a Neighbourhood Associatio	on?
□ Fa □ Ri □ Ci □ Ti □ O	utdoor Rink amily Fun Days/ Carnivals ecreation Programs ommunity Safety raffic Safety ther ther		rage Sale n(s)
Are there	any issues or occurrences i	n your neighbourhood that a	affect your quality of life?
	<u>least</u> 4 volunteers plus myse es, I do	If, who would be willing to so	erve on a neighbourhood association Phone Number
Name		Address	Phone Number
Name	1.0	Address	Phone Number
Name	190	Address	Phone Number
Name	. 4/1	Address	Phone Number
Name D N	o, I need assistance in recrui	Address ting the volunteers needed t	Phone Number to have a neighbourhood association.
(Signature of	Applicant)	(Date)	

RETURN FORM TO: Brantford Parks & Recreation, 1 Sherwood Dr. Brantford, ON N3T 1N3 Attention: Community Recreation Development or FAX to (519)759-5975 For more information, Brantford Parks & Recreation please call (519)756-1500

^{*} Personal information on this form is collected under the authority of **Section 10** (1) the *Municipal Act*, **S.O. 2001.C.25** and will be used for the Neighbourhood Association purposes. The information collected on this form may be included in a public document and is protected under the Municipal Freedom of Information and Privacy Act. Questions about this collection should be directed to the Director of Parks & Recreation, 1 Sherwood Drive, Brantford, ON N3T 1N3