



**SUBSCRIPTION REQUEST FORM
REGIONAL MUNICIPALITY OF NIAGARA
REGIONAL COUNCIL AND STANDING COMMITTEE MATERIAL**

SURNAME _____ INITIAL _____

TITLE _____

COMPANY NAME _____

STREET ADDRESS _____

CITY, PROVINCE _____

POSTAL CODE _____

TELEPHONE NUMBER _____

FAX NUMBER _____

PLEASE INDICATE NEW SUBSCRIBER RENEWAL CHANGE OF ADDRESS

PLEASE MAKE CHEQUES PAYABLE TO: THE REGIONAL MUNICIPALITY OF NIAGARA

SEND ORDER TO: KEVIN BAIN
REGIONAL CLERK
REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, P.O. BOX 1042
THOROLD, ONTARIO L2V 4T7
FAX 905-687-4977

<u>ITEM</u>	<u>ANNUAL COST</u>	<u>COPIES REQUIRED</u>	<u>MAILING REQUIRED</u>	<u>TOTAL</u>
COUNCIL BLUE BOOK (includes Council agenda, with all attachments, by-laws, minutes of previous meetings & reports of standing committees)	\$235.70	_____	_____	_____
EACH STANDING COMMITTEE				
AGENDA PACKAGE (includes all background reports) CORPORATE SERVICES PUBLIC HEALTH & SOCIAL SERVICES INTEGRATED COMMUNITY PLANNING PUBLIC WORKS	\$107.00	_____	_____	_____
MINUTES ONLY CORPORATE SERVICES PUBLIC HEALTH & SOCIAL SERVICES INTEGRATED COMMUNITY PLANNING PUBLIC WORKS	\$ 74.90	_____	_____	_____
<p>*(Annual Cost includes HST)</p> <p align="right">TOTAL</p>				\$ _____