

Nature's  
EMPORIUM presents



Run or Walk for  
**SOUTHLAKE**  
REGIONAL HEALTH CENTRE  
10K • 5K • 2.5K • Kids Mini Mile



January 15, 2014

Mr. Andrew Brouwer  
Director, Legislative Services/Town Clerk  
Town of Newmarket  
395 Mulock Drive  
P.O. Box 328 STN Main  
Newmarket, ON L4G 6J1

Dear Mr. Brouwer,

I wish to delegate to Council at the February 3, 2014 meeting at 1:30 p.m. regarding the annual Run or Walk for Southlake to be held on Sunday, April 27, 2014 at the Aurora Community Centre.

I wish to inform Council of some changes with this year's event and encourage participation and support. Should you have any questions, please contact Cortney Cassidy, Special Events Officer (905) 836-7333, ext. 5106 or [cdcassidy@southlakeregional.org](mailto:cdcassidy@southlakeregional.org).

Sincerely,

Steve Hinder  
Chair, 2014 Run or Walk for Southlake  
[Steve.Hinder@stronachgroup.com](mailto:Steve.Hinder@stronachgroup.com)



TOWN OF NEWMARKET  
 Legislative Services Department  
 395 Mulock Drive www.newmarket.ca  
 P.O. Box 328 clerks@newmarket.ca  
 Newmarket, ON L3Y 4X7 905.895.5193

**Request for Deputation**

**Request for deputation and/or any written submissions and background information for consideration by either Council or Committee of the Whole must be submitted to the Legislative Service's Department by the following deadline:**

**For Council – by 12 noon on the Wednesday immediately prior to the requested meeting.**

**For Committee of the Whole (for items not on the agenda) – by 12 noon on the Wednesday twelve days prior to the requested meeting.**

PLEASE PRINT

COUNCIL/COMMITTEE DATE: February 3, 2014

AGENDA ITEM NO. \_\_\_\_\_ SUBJECT: 2014 Run or Walk for Southlake

NAME: Steve Hinder (Chair, Run or Walk Committee)

ADDRESS: 102-581 Dan's Dr

Street Address

Newmarket

Town/City

L3Y 2P6

Postal Code

PHONE: HOME: \_\_\_\_\_ BUSINESS: 905.836.7333 x. 5106

FAX NO.: 905.836.5651 E-MAIL ADDRESS: cdccassidy@southlake.regional.org

NAME OF GROUP OR PERSON(S) BEING REPRESENTED (if applicable)

Southlake Regional Health Centre Foundation

BRIEF STATEMENT OF ISSUE OR PURPOSE OF DEPUTATION

We wish to launch the Mayor's Challenge in support of the event and encourage participation.

Personal information on this form will be used for the purposes of sending correspondence relating to matters before Council. Your name, address, comments, and any other personal information, is collected and maintained for the purpose of creating a record that is available to the general public in a hard copy format and on the internet in an electronic format pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56, as amended. Questions about this collection should be directed to the Director of Legislative Services/Town Clerk, Town of Newmarket, 395 Mulock Drive, P.O. Box 328, STN Main, Newmarket, ON L3Y 4X7; Telephone 905-895-5193 Ext. 2211 Fax 905-953-5100.