



Accessible Information and Communication Request

Format Request Form

(This form is also available in large print)

Name	
Address	
Telephone	
Date of Request	
Email Address	

Request for information in an alternative format (in English):

Document				
Date Required				
Format (please indicate with x)	Large Print	Plain Language	Audio Text	Braille**
Preferred Delivery Method (indicate with X)	Email	Mail	Pick Up	Type of Media +
<p>*Indicates font size ** Indicates Braille Grade +Type of Media includes: CD, memory stick, etc.</p>				

Complete and return to Cathy Addison, Deputy Clerk by email at
cathya.nbp@amtelecom.net