

Submission Number:	
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## **INVERCARGILL CITY COUNCIL SUBMISSION FORM:** EQUITY AND ACCESS FOR PEOPLE WITH DISABILITIES POLICY - 2016/17 REVIEW **CONTACT DETAILS (Please print clearly)** Name: **Contact Person:** (if the name above is an organisation) **Postal Address:** Daytime Telephone: \_\_\_\_\_ Email: \_\_\_\_ Signature: I wish to speak to the Mayor and Councillors about my submission: Yes $\square$ No $\square$ MY SUBMISSION ON THE EQUITY AND ACCESS FOR PEOPLE WITH DISABILITIES POLICY IS:

Post this form to Invercargill City Council, Submission – Equity and Access for People with Disabilities Policy Review, Private Bag 90104, Invercargill

(insert extra pages here)

Post this form to Invercargill City Council, Submission – Equity and Access for People with Disabilities Policy Review,
Private Bag 90104, Invercargill

Submissions close at 5.00 pm on 5 December 2016