City of Longmont
REQUEST FOR PROCLAMATION

Return completed form to:
Proclamation Request
Office of the Mayor
City of Longmont
350 Kimbark Street
Longmont, CO 80501

CONTACT INFORMATION

Your name _____

Street address _____

City _____ State _____ ZIP _____

Email address _____

Phone _____

PROCLAMATION INFORMATION

Name of event: _____
(Arbor Day, Historic Preservation Month, Food Drive Week, etc.)

Date you would like proclaimed _____

SPONSOR/ORGANIZATION INFORMATION

Sponsor name _____

Sponsor description _____

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Background information (summary of the event, date or program being proclaimed)

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PROCLAMATION TEXT (Please attach another sheet if you need more room.)

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Please select one of these delivery methods

☐ I will pick up the proclamation at the mayor's office. (You will be contacted when it is ready.)

☐ I would like the proclamation presented at a city council meeting. (You will be contacted with a confirmation of the date and time of the presentation.)

Please provide the names and titles of the people who will be present to accept the proclamation at the city council meeting

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