



CITY OF BERLIN
Public Meeting Participation
Registration Card

Meeting Date: _____

Governmental Body: _____

Person Wishing to Speak: _____

Speaker Address (Must be completed to speak): _____

Is Speaker a resident of Berlin? ☐ Yes ☐ No

Is Speaker: ☐ Individual or ☐ Group Representative

Group Name: _____

Agenda Item to Speak to: _____

OR

Issue to Speak To: _____



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