## Form EL52

# Consent to Release Personal Information

*Municipal Freedom of Information and Protection of Privacy Act*

Personal information on the Nomination Form/Notice of Registration of Third Party Form is collected under the authority of the *Municipal Elections Act* and will be used to assist the Clerk in the administration of the 2018 Municipal Elections. Questions regarding this collection should be forwarded to the Clerk at 760 County Rd 36, Trent Lakes ON K0M 1A0 or 705-738-3800.

Name of Candidate/Registered Third Party: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate for the office of:

* Mayor
* Deputy Mayor
* Councillor, Harvey Ward
* Councillor, Galway-Cavendish Ward
* Councillor, Councillor at Large
* Registered Third Party

I acknowledge that the Nomination Form/Notice of Registration of Third Party Form filed by me contains personal information and I am aware that the Clerk will disclose all or part of it to the general public. However, I do not consent to the release of my:

* Home telephone number
* Cellular phone number
* Email address

Candidate/Registered Third Party signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clerk or Designate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2018.