



CITY OF GARDEN CITY

6015 Glenwood Street ■ Garden City, Idaho 83714
Phone 208/472-2900 ■ Fax 208/472-2996

PUBLIC HEARING SIGN-UP SHEET

You must sign up to testify – or submit comments

(please place in the basket)

File Number: _____

Date: _____

PLEASE PRINT LEGIBLY

Name: _____

Physical Address (City & State of residence, not PO Box):

E-Mail: _____

Voluntary Information	
<i>Please check the following boxes if applicable:</i>	
<input type="checkbox"/> American Indian or Alaskan Native	
<input type="checkbox"/> Asian	
<input type="checkbox"/> Black or African American	
<input type="checkbox"/> Hispanic or Latino	
<input type="checkbox"/> White	
<input type="checkbox"/> Male	<input type="checkbox"/> Female
Disabled	<input type="checkbox"/> Yes <input type="checkbox"/> No

Choose one: _____ Support the application _____ Neutral _____ Oppose the application

Do you wish to testify? Yes _____ No _____

Do you wish to be an interested party? ____Yes ____No If yes, email: _____

If you do **not** wish to testify orally, your comments on this sheet will be read into the record – so long as they are written legibly, signed below and do not exceed the space allotted.

Written Signature (only if not testifying)