

PROXY

Proxy form must be completed and returned no less than 48 hours in advance of the meeting to:

Shelley May
Executive Coordinator
Community Living Guelph Wellington
8 Royal Road, Guelph, ON N1H 1G3
shelleymay@clgw.ca

I, _____ choose to appoint
_____ as my proxy to vote on my behalf at the Annual
Members Meeting being held on September 25, 2024.

In appointing _____ to act on my behalf, I am aware of the
rights and limitations imposed on them by the use of this proxy.

Signature of Member: _____

Date: _____