



# NEIGHBORHOOD WATCH MEETING REQUEST FORM

**PLEASE PRINT LEGIBLY**

Submit form to Administrative Asst. to the City Manager  
Trotwood Government Center 2<sup>nd</sup> Floor, 3035 Olive Road, Trotwood, OH 45426

Today's Date: \_\_\_\_\_

**NEIGHBORHOOD WATCH GROUP INFORMATION**

Contact Person's Name			
Primary Telephone Number	Alternate Telephone Number	Email Address	
Neighborhood Watch Group Name/Location (i.e., Shiloh Gardens; Belle Meadows; etc.)			
Meeting Location (include Street Address)	City	State	Zip Code
Meeting Date	Meeting Time		

**REQUEST FOR COUNCIL OR CITY STAFF TO ATTEND MEETING**

We would like a City Council Member to attend our next meeting (date/time indicated above).

We would like a specific Council Member (or more) to attend. Names are listed below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attendance Request continues on reverse side**

- We would like a City staff person to attend our next meeting (date/time indicated above).
- We would like a specific Staff person (or more) to attend. Names are listed below:

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**QUESTIONS/ISSUES TO BE ADDRESSED**

We would like the following questions answered or issued discussed/addressed at the meeting.

1.

2.

3.

4.

5.