



Candidate/Official Agent Consent

Local Jurisdiction: **Yellowhead County**, Province of Alberta

I, _____, hereby grant consent to Yellowhead County to release the following personal information about me to the Province of Alberta, any interested person, organization, or media source from the date this Release is signed until the completion of the 2025 municipal election.

Name: _____

Mailing Address: _____

Phone Numbers: _____
Home Cell

E-mail Address: _____

Website/Social Media: _____

COMMUNICATIONS CONSENT

- Yes, I agree to have my name and contact information listed as a candidate on the Yellowhead County website's Election page prior to Nomination Day, September 22, 2025.
- Yes, I would like to receive candidate information and updates from the Returning Officer.

Signature

Date

The personal information on this form is being collected to support the administrative requirements of the local authority election process. It is authorized under section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact the FOIPP Coordinator for Yellowhead County at 780-723-4800.