



**Austin Independent School District**  
**[Name of Advisory Body]**

**SPEAKER AND COMMENT CARD**

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please Check One or Both of the Following:

- I would like to speak       I am providing written comments

If you would like to speak, please note that you must first acknowledge that you have read the Citizens Communications and Visitor Guidelines before this card is accepted:

- I have read the Citizens Communications and Visitor Guidelines

If you would like to provide written comments, please do so in the following space (you may continue on the back of this card if needed):



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