



Christchurch City Council  
Long-Term Community Council Plan  
Submission

Please provide the personal details below or your submission will not be considered by Council

Your Name: Deanne White

Contact Address: 59 Innes Rd, Christchurch

Postcode 8052 Phone No (day) 355 3437

Phone No (evening) 355 3437

Email (if applicable) \_\_\_\_\_

Please be as specific as possible to help Council understand your views.

Why do you want the Council to consider the provision of additional artificial fields? What specific action you think the Council should take? Why should this be done?

There's not enough & many teams  
have to practise on substandard turfs.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please continue on reverse side if further space is required.

Thank you for making this submission.