

## Walter, Penny

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**From:** City Council  
**Subject:** FW: Form submission from: Write a Letter to Council

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**From:** Web NoReply <web-noreply@Saskatoon.ca>  
**Sent:** Saturday, February 20, 2021 10:24 PM  
**To:** City Council <City.Council@Saskatoon.ca>  
**Subject:** Form submission from: Write a Letter to Council

Submitted on Saturday, February 20, 2021 - 22:23

Submitted values are:

Date Saturday, February 20, 2021

To His Worship the Mayor and Members of City Council

First Name Manuela

Last Name Valle-Castro

Phone Number

Email

Address Ave I South

City Saskatoon

Province Saskatchewan

Postal Code

Name of the organization or agency you are representing (if applicable) Division of Social Accountability, College of Medicine

Subject On the motion to ban conversion therapy

Meeting (if known)

Comments

I would like to provide evidence of that supports the ban of conversion therapy in Saskatoon.

Attachments