

GWRRA IOY AFFILIATION

Part I: To be completed and signed by the candidate.

1. I am aware I have been nominated for the Individual of the year. I agree to give GWRRA full publicity and cooperation if selected as finalists at any level (Chapter, District) of the program.
2. I have not competed for Individual of the Year during the past five years.
3. If selected as a finalist in Chapter competition, I wish ___ / do not wish ___ to compete for District Individual of the Year. If competing for District Individual of the Year, I agree to attend the District event where District selection takes place.
4. I have participated in the following GWRRA activities:
 - a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
 - h.
 - i.
 - j.

Signed: _____ Date: _____

Type or print name of candidate:

Signed by candidate: _____ Date: _____

Part II- to be completed and signed by candidate's Chapter or Assistant Director

I certify that the above named individual is a participant of
Chapter: (include city and District):

Signed: _____ Date: _____
(Indicate CD or ACD)