

GWRRA INDIVIDUAL OF THE YEAR NOMINATION FORM

(Type or print Legibly)
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I wish to nominate the following candidate for consideration as a GWRRA Individual of the Year. A copy of this form will be submitted to the Chapter Director as soon as possible, but not later than January 15.

CANDIDATE'S INFORMATION

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: () _____ E-MAIL: _____

CHAPTER DESIGNATION: _____

GWRRA NUMBER: _____

EXPIRATION DATE: _____ JOIN DATE: _____