



**TOWN OF BRACEBRIDGE VOLUNTEER AWARD  
NOMINATION FORM 2018**  
Community Recognition Advisory Committee

Date:

**MY NOMINATION IS FOR THE FOLLOWING AGE CATEGORY:**

- Youth (Age 15 - 24)                       Adult (Age 25 – 64)                       Senior (Age 65+)

**MY NOMINATION IS FOR:**

- Individual                                       Group     Business

**INDIVIDUAL, GROUP OR BUSINESS BEING NOMINATED:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Name of Organization (if applicable): \_\_\_\_\_

Home/Business Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone: \_\_\_\_\_ (H) \_\_\_\_\_ (C)

**DESCRIPTION OF THE INDIVIDUALS/GROUP/BUSINESS CONTRIBUTIONS:**

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**PLEASE LIST ALL ORGANIZATIONS THAT THE INDIVIDUAL VOLUNTEERED WITH BOTH PAST AND PRESENT:**

<b><u>Organization/Contact Name and Number</u></b>	<b><u>Length of volunteer contribution</u></b>
_____	_____
_____	_____
_____	_____
_____	_____

**NOMINATION SUBMITTED BY:**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OTHER INDIVIDUALS, ORGANIZATIONS OR GROUPS SUPPORTING THIS NOMINATION:**

\_\_\_\_\_

\_\_\_\_\_

**Submission Deadline: Thursday March 15, 2018**

This form may be faxed, emailed, submitted online or delivered to the Town of Bracebridge as follows:

Fax form to: Community Recognition Advisory Committee  
Attention: Cathy Janke  
705-645-3030

E-mail form to: [cjanke@bracebridge.ca](mailto:cjanke@bracebridge.ca)

Deliver form to: Town of Bracebridge  
Recreation Department  
Attention: Cathy Janke  
Bracebridge Sportsplex  
110 Clearbrook Trail  
Bracebridge, ON  
P1L 0A3

**To submit form online:**  
Click the SUBMIT button below and send an e-mail containing any supplementary documentation/letters to [cjanke@bracebridge.ca](mailto:cjanke@bracebridge.ca).

I have sent an e-mail containing additional information.

Personal information contained on this form is collected under the authority of the Municipal Act, S.O. 2001, C. 25, as amended, and will be used for the selection of nominees for municipal volunteer recognition purposes. Questions regarding this collection should be directed to the Municipal Clerk, 1000 Taylor Court, Bracebridge, Ontario P1L 1N2. (705)-645-5264.