



NOMINATION FORM

NOMINEE INFORMATION

FIRST NAME _____ LAST NAME _____

TITLE _____

COMPANY _____

BUSINESS ADDRESS _____

CITY _____ PROVINCE _____ POSTAL CODE _____

PHONE _____ FAX _____

EMAIL _____

HOME ADDRESS _____

CITY _____ PROVINCE _____ POSTAL CODE _____

PHONE _____

EMAIL _____

The nominee has consented to be nominated for the Legends of Ontario Sailing Award.

NOMINATOR INFORMATION

FIRST NAME _____ LAST NAME _____

TITLE _____

COMPANY _____

ADDRESS _____

CITY _____ PROVINCE _____ POSTAL CODE _____

PHONE _____ FAX _____

EMAIL _____

I hereby declare that the information contained in this nomination to be true to the best of my knowledge.

DETAILS OF NOMINEE

1. Please describe the activity for which the nominee is being nominated for inspiring the future of sailing.

2. Please describe any other contributions the nominee has also made to inspire the future of sailing.

3. Please describe how this activity has inspired the future of sailing.

4. Please describe the community or group of “sailors” that has been most impacted by this nominee’s contribution. Please also include other communities, groups or individuals who have been inspired by this nominee.

5. Please list any other awards that this nominee has received in the past.
