



POVB LIFE MEMBER AWARD NOMINATION FORM

Background:

This Award is for the recognition of a member or a delegate who has given in excess of 10 years' outstanding service to the POVB.

Nominated Person: _____ **Location:** _____

Reason: _____

Nominated by (Print and Sign):

1. Name: _____ Signature: _____ Number: _____
2. Name: _____ Signature: _____ Number: _____
3. Name: _____ Signature: _____ Number: _____
4. Name: _____ Signature: _____ Number: _____
5. Name: _____ Signature: _____ Number: _____
6. Name: _____ Signature: _____ Number: _____
7. Name: _____ Signature: _____ Number: _____
8. Name: _____ Signature: _____ Number: _____
9. Name: _____ Signature: _____ Number: _____
10. Name: _____ Signature: _____ Number: _____