

SAA ANNUAL RECOGNITION AWARDS NOMINATION FORM

Your Name:	
Date:	
Nominee Name:	
Nominee Gender:	
Nominee Age:	
Nominee Classification:	

Please check the award for which you are nominating the above listed nominee:

<input type="checkbox"/>	Volunteer of the Year
<input type="checkbox"/>	Coach of the Year
<input type="checkbox"/>	Male Athlete of the Year
<input type="checkbox"/>	Female Athlete of the Year
<input type="checkbox"/>	Junior Male Athlete of the Year
<input type="checkbox"/>	Junior Female Athlete of the Year
<input type="checkbox"/>	Judge of the Year

List a short resume of the nominee's achievements/accomplishments (based on the previous year)

Signature

Email completed application form to: info@saskarchery.ca