NOMINATION FOR THE "BOBBY WILLIAMS MEMORIAL AWARD"

Name: _____

ClownName: _____

The above named individual is nominated for the "Bobby Williams Memorial Award" by:

(Alley name or individual)._____

(Please list qualifications and contributions in 150 words or less)

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Please send us your contact information:

Name:_____
Address:_____
City_____State:_____Zipcode_____
Phone #_____
Email:_____
Please submit completed nomination form and include picture if available to:

April "Kaatcher" Malara
1625 Shelbourne Lane
The Villages, Fl. 32162
352-751-1783
aprilbaby333@gmail.com

Revised 11/23)
Revised 03/21/2026