



KENTVILLE VOLUNTEER RECOGNITION BRUNCH
Saturday, April 8th, 2017

PLEASE COMPLETE AND RETURN BEFORE MARCH 24TH, 2017

Name of Nominee/organization/association/club: _____

Contact Person for your organization/association/club: _____

Phone Number: _____ Fax #: _____ E-mail: _____

VOLUNTEER NOMINEE INFORMATION:

Volunteer's Name: _____ Phone # _____

Address: _____ Postal Code: _____

Position held by volunteer in this organization: _____

Please give a brief narrative summary of the volunteer work done by the nominee within your organization: *(This information will be used by the Recreation Department to create a Volunteer Bio that will be read by the MC during the awards ceremony)*
